

06-26-15

Dawn Suppo Eeoc 500 W Madison Ste 2000 Chicago II Chicago IL 60661 **United States** 

Folio No. A/R Number

Membership No.:

Cashier No. : 145

Room No. :

401 : 06-24-15

Group Code Company

Invoice No.

**Business** 

Arrival Departure : Conf. No. :

06-26-15 60053855

Page No. : 1 of 1

Rate Code: IMGOV

Date	T Such	Description		Charges	Credits
06-24-15	Government Rate			192.00	
06-24-15	State Occupancy Tax			22.85	
06-24-15	City Occupancy Tax			8.64	
06-25-15	Visa			0.04	446.98
06-25-15	Government Rate			192.00	440.90
06-25-15	State Occupancy Tax			22.85	
06-25-15	City Occupancy Tax			8.64	
			Total	446.98	446.98
			Balance	0.00	

G	u	es	t	S	ig	n	a	t	u	r	е	:	
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I have received the goods and / or services in the amount shown heron. I agree that my liablity for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

## BARKSDALE - Payment Receipt [For Conf# 17161]

com:

"A-TOP LIMOUSINE SERVICE INC." <atoplimo@comcast.net>

To:

<joyce.barksdale@eeoc.gov>

Date:

6/29/2015 10:04 PM

Subject: Payment Receipt [For Conf# 17161]

## A-TOP LIMOUSINE SERVICE INC.

3413 w. 38th place Suite #2 Chicago, IL 60632

United States of America Tel: (312) 835-9720

Email: atoplimo@comcast.net

Payment Receipt

## For Confirmation #17161

Timestamp:06/29/2015 10:04 PM

Thank You for traveling with A-TOP LIMOUSINE SERVICE INC.! Below please find your payment Receipt. If any of the information appears to be incorrect, please contact our office (312)835-9720 immediately to correct it.

Method:

Visa \*\* 2233

Type:

AUTH\_CAPTURE

**Transaction Amount:** 

\$69.00

Reference/Trans. ID:

Passenger:

DAWN cell#

SUPPO

**Trip Confirmation#** 

17161

**Trip Date & Time:** 

06/24/2015 @ 09:15 AM

**Routing Information:** 

Pick-up Location: ORD, American Airlines - AA 1039, From/To: FLL

Notes: PLEASE CALL (312)835-9720 OR (866)454-2867 WHEN YOU HAVE ALL

YOUR LUGGAGE.

Drop-off Location: 500 W. MADISON ST. 2800 CHICAGO, IL 60661

**Reservation Total:** 

\$69.00

Payments/Deposits: \$69.00 **Authorizations:** 

\$0.00

**Total Due:** 

\$0.00

La Quinta Inn & Suites Chicago Downtown One South Franklin Street Chicago, IL 60606 312-558-1020

SUPPO, DAWN EOC 500 MADISON SUITE2000 CHICAGO, IL 60601

Company: GOVERNMENT RATE

Folio#: 2013347848

Room: 502 Arrival: 03/13/16 Departure: 03/14/16

Returns Club No: Voucher/Ship/PO:

Trans#	Date	Description	Charges	Payments	Balance
042906	3/13/2016	Rm: 502 GSA - GOVERNMENT	\$159.00	\$0.00	\$159.00
042907	3/13/2016	TAX - OCCUPANCY - CITY	\$16.25	\$0.00	\$175.25
042908	3/13/2016	TAX - OCCUPANCY - STATE	\$9.81	\$0.00	\$185.06
043188	3/14/2016	CC PMT - VISA 2233	\$0.00	\$185.06	\$0.00
		(#X		Balance:	\$0.00

		 <del></del>	 
Signature:			
56.7			

THANK YOU WE APPRECIATE YOUR BUSINESS



Hyatt Chicago Magnificent Mile 633 North Saint Clair Street Chicago, IL 60611 Tel: 312-787-1234 Fax: 312-274-0164 www.hyattchicagomagmile.com

## INFORMATION INVOICE

Guest Suppo, Dawn

Payee Joyce Barsdale

United States

Confirmation No. 2414840401

Group Name

Room No. 1723 Arrival 08-14-16 Departure 08-16-16 Page No. 1 of 1

Folio Window 2

Folio No. 369498

469.60

0.00

469.60

Date	Description	7	Folio No.	369498	
08-14-16	Accommodation		C	harges	Credits
08-14-16 08-14-16 08-15-16	Occupancy Tax - State - 11.9% Occupancy Tax - City - 4.5% Occupancy Tax - County 1% Accommodation			200.00 23.80 9.00 2.00	
08-15-16 08-15-16 08-15-16	Occupancy Tax - State - 11.9% Occupancy Tax - City - 4.5% Occupancy Tax - County 1%			200.00 23.80 9.00	
08-16-16	Visa	448670XXXXXX2233 06/19		2.00	469.60

Balance

## Guest Signature

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

## **Hyatt Gold Passport Summary**

Membership:

531866740Z

3onus Codes:

Qualifying Nights:

404.00

Eligible Spend: Redemption Eligible:

4.58

Summary Invoice, please see front desk or eligibility details.

# Thank you for choosing the Hyatt Chicago Magnificent Mile.

We look forward to hearing your feedback. Please e-mail your comments to: chimm-fom@hyatt.com

> Please remit payment to: Hyatt Chicago Magnificent Mile 633 North Saint Clair Street Chicago, IL 60611

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TRAVEL VOJCH	Act   DEPA		R ESTABLISHMEN N, OR OFFICE	IT,	2. TYF	PE OF TRAVEL	3. VOU	CHER NO.		
(Read the Privacy Statement on the	ie					TEMPORARY DUTY	4 800	EDULE NO.		
back)	LEFOC	-Chicago	District Office	е		PERMANENT CHANGE OF STATION	4. 3011	EDULE NO.		
a. NAME (Last, first, mid-	dle initial)			· · · · ·	b. SOC	CIAL SECURITY NUMBER		OD OF TRA		
© Suppo Down							a FRO		b. TO	
Suppo, Dawn	Include 7IP Code	1			4 055	ICE TELEBHONE NO		3/2016	03/14/2016	
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c. MAILING ADDRESS (									3/14/16	
e. PRESENT DUTY STA	TION		f. RESIDENCE	(city and Sta	ate)				0, 1 1, 10	
			See (c)	8						
ιή							10. CHE	CK NO.		
8. TRAVEL ADVANCE			9. CASH PAYN	MENT RECE	IPT		11. PAI	D BY		
a. Outstanding			a. DATE RECE	EIVED	b. AMO	OUNT RECEIVED				
b. Amount to be applied					\$					
c. Amount due Government	¬ 1		c. PAYEE'S SI	GNATURE						
(Attached: Check d. Balance outstanding	Cash)		$\dashv$							
12 GOVERNMENT	I hereby assign	to the United	States any right I r	may have an	ainet any	parties in connection with	reimbure	able	Traveler's Initials	
TRANSPORTATION REQUEST, OR TRANSPORTATION						nent procedures (FPMR 10		abic		
TICKETS, IF PUR- CHASED WITH CASH	AGENT'S	ISSUING	MODE,	DAT	F	ь	OINTS	OF TRAVE	:1	
(List by number below VALUATION CARRI and attached passenger OF TICKET (Initial		CARRIER (Initials)	CLASS OF SERVICE	ISSU			Olivio	DI IIVAVE	- I	
coupon, if cash is used show claim on reverse			AND ACCOM- MODATIONS		FROM			TO		
side )	(a)	(b)	(c)	(d)	1	(e)			(f)	
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	3/5,2	S.								
	212,00									
		1								
<ol> <li>I certify that this voucher been received by me. Whe</li> </ol>									,	
TRAVELER	3					DATE A	MOUN		\$ 161.00	
SIGN HERE						С	LAIME	D 🖊	\$ 161,	
NOTE; Falsification of an it of not more than \$1										
14. This voucher is approved						17. FOR FINANCE OFFICE US	E ONLY			
in the interest of the Gov the approving official n	ernment (NOTE:	If long dista	ince telephone ca	ils are inclu		COMPUTATION			_	
department or agency t						a, DIFFER- ENCES,		-	\$	
APPROVING \				1DATE		IF ANY				
OFFICIAL				DATE		(Explain and show				
SIGN HERE						amount)				
a VOUCHER NO.		SAME TRAVÈ SYMBOL	L AUTHORIZATION	Ic. MONTH	p	b. TOTAL VERIFIED CORR	ECT COD			
a voochen no	D. D.O. C	TIMBOL		YEAR	α	CHARGE TO APPROPRI				
						Certifier's Initials:			\$	
16. THIS VOUCHER IS CER	TIFIED CORREC	CT AND PRO	PER FOR PAYME	NT		c APPLIED TO TRAVEL (Appropriation symbol)	ADVANC	E		
AUTHORIZED CERTIFYING				1		(Appropriation symbol)			s V	
OFFICIAL				DATE		A NET TO TRAV	ELED		11/1 101	
SIGN HERE						d. NET TO TRAV	CLCK		\$ 10100	
18. ACCOUNT CLASIFICAT	ION									

NSN 7540-00-634-4180

Complete this PAGE 2	jo	TRAVEL AUTHORIZATION NO. EECGCCH116101365	TRAVELER'S LAST NAME SUPPO	AMOUNT CLAIMED		SUBSISTENCE OTHER	(m) (m)		55.50	20.00	55.50							111.00 50.00	111.00 50.00	Enter grand total of columns (I), (m) and (n), below and in item 13 on the front of this form.
ပို့			•			MILEAGE	(1)													Enter grant (n), below a this form.
	tips, and ng clothes, tips	ense travel. avel on actual	if purchased vemment etc.	MILEAGE	A H	NO. OF	(k)											SUBTOTALS ▶	TOTALS ▶	ing or fing of a duty while in of the Internal
	Show amount incurred for each meal, including tax and tips, and daily total meal cost. Show expenses, such as: laundry, cleaning and pressing clothes, tips to bellious, portiers etc. (rither than for meals)	Complete for per diem and actual expense travel. Show total subsistence expense incurred for actual expense travel. Show per diem amount, limited to maximum rate, or if travel on actual expense, show the lessen of the amount from col. (i) or maximum rate.	Show expenses, such as: faxifimousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.		TOTAL	EXPENSE	Ø		55.50		55.50							SUBT	Ĭ.	investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hining of an employee, the issuance of a security clearance, or investigations of the per-formance of official duty while in Government eviver your Social Security Authority CSNs is sociated under the authority of the Internal Passagnia Cycle 25st ISC 8014 Ms and 6100 and EC 8027 Manager 2103 for a passagnia and 100
	Show amount incurred for each meal, includin daily total meal cost. Assessing a silvandry, cleaning at sollbows porders etc. (other than for meals) to hellbows porders etc. (other than for meals).	liem and actual ex ence expense inco nount, limited to ma lesser of the amo	uch as: taxi/limourlong distance tele	KPENSES	O C		(0)													equirement by this agency or investigations of the umber (SSN) is solicite
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explanation	~			ED SUBSIS		TOTAL	( <i>b</i> )		55.50		55.50								¥.	suance of a sec Your Social Sec
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Jnlisted ite	Com- plete only	for actual expense	travel		M	LUNCH	(e)												., leaving tn	
	0 11 0	<i></i> 0 0	<b></b>			BREAK- FAST	(p)		:									70	IZ-A BACK	n of the information ations (FPMR 10 13, and 26 U.S.C
INSTRUCTIONS TO TRAVELER	Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show	member's names, ages and relationship to em- ployee and marital	status of children (unless information is shown on the travel authorization.)	DESCRIPTION	(Departure/arrival city, per diem	explanations of expense )	(c)	AA Flight from Ft.Lauderdale, Fl to O'Hare Airport Chicago	10:55 am Arrive O'Hare Airport	TAXI from Chicago to O'Hare	AA Flight from O'Hare			EEOC v. Costco, 14 cv 06533,	Job No. 14CHI010				ii addiilonai space is required, continue on another SF 1012-A BACK, leaving the front blank.	In compliance with the Privacy Act of 1974, the following information is provided Solicitation of the information on this form? is authorized by 5 U.S.C. Chap, 27 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1914, and T.P. E.O. 110012 of March 27, 1925, and So.U.S.C. 6911(b) and 510 U.S.C. 6911(b) U.S.C. 6911
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	SCHEDULE OF	AND AMOUNTS	CLAIMED	DATE	0	91.07	(a)	03/13	03/13	03/14	03/14		i i					1 1000	ii addillo	In compliance form is authoria 11609 of July and 6109. The

In Quintaire will the Thirds Act to 1914, the totalowing intollation is provided. Severation for this introduction of this control of the Conf. is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. an emitties of July 22, 1971, E.O. 110012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b). Govern and Elibs. The primary purpose of the requested information is to determine payment or reimbursement to eligible. Revenusing individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and employees who have a need for information in the performance of their official duties. The information may be voluntain disclosed to appropriate Federal, State, local, or foreign agencies when relevant to civil, criminal or regulatory may response.

4

investigations or prosecutions, or when pursuant to a requrement by this agency in connection with the fining or fining of an employee, the issuance of a security clasmance, or investigations of the per- formance of official dry while in Government service Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011 (b) and 6109) and E.O. 9397, November 22, 1943, for use as a taxpayer and/or reproper extensification number, disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances, however failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

STANDARD FORM 1012 BACK (10-77)

161.00

TOTAL
AMOUNT
CLAIMED



Trip on Mar 13, 2016

Locator: NVVVHE

Date: Mar 07, 2016

Traveler

**DAWN SUPPO** 

EEOC

361MX3M

THIS IS AN ITINERARY ONLY AND NOT A VALID TICKET

Customer Number

Agent

ΑМ

TA RCVD FR JULIANNE BOWMAN-BY MI MARTINEZ

Sunday, March 13, 2016

Confirmation NVVVHE



#### Flight AMERICAN AIRLINES 1150

DEPARTURE FT LAUDERDALE, FL

8:30 AM, Mar 13, 2016

ARRIVAL

CHICAGO/OHARE 10:55 AM, Mar 13, 2016

Status Class

Duration

Equipment Meal Service

Food For Purchase DEP-TERMINAL 3 ARR-TERMINAL 3

ONEWORLD

Confirmed

Coach Class - G 03:25 (Non-stop)

Boeing 737-800

#### Monday, March 14, 2016

Confirmation NVVVHE



#### Flight AMERICAN AIRLINES 1483

DEPARTURE CHICAGO/OHARE 6:46 PM, Mar 14, 2016

FT LAUDERDALE, FL 10:51 PM, Mar 14, 2016

Status

Class Duration Equipment Coach Class - G 03:05 (Non-stop) Boeing 737-800 Food For Purchase

Confirmed

Meal Service Notes

DEP-TERMINAL 3 ARR-TERMINAL 3

ONEWORLD

SEAT ASSIGNMENT RESTRICTED TO AIRPORT CHECK-IN

<u>Name</u>

Invoice / Ticket / Date

Base

USD 236.28

Tax 1

8.00ZP

Tax 3 20.20XT

**Total Amount** 

17.72US

282.20 282.20

Total

Form of Payment: VIXXXXXXXXXXXX3675

## **GENERAL INFORMATION**

THANK YOU FOR BOOKING WITH CWTSATOTRAVEL PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT CWTSATOTRAVEL PHONE RESERVATION 877-532-8740 HOURS OF BUSINESS ARE MON-FRI 7AM-10PM EASTERN FOR AN AFTER HOURS EMERGENCY, PLEASE CONTACT



# Sun Taxi Association

4626 W. Cornelia Ave., Chicago, IL 60641

Office Hours
M~F 9-5
Sat. 9-2
Sun. Closed

Dispatch and Lost & Found (773)736-3399

Main Office Tel.(773)736-3883 Fax (773)736-6294

					•	- 4
C	ah	Re	C	e	10	I
	au	100	_		s. T	

Date 13/14/2016 Ti	me:a.mp.m.
Driver Name & C.L#	
Fare \$ 50 ×	
	Passenger Signature

info@suntaxichicago.com

\*Verify CAB number before signing receipt.

# CLAIMS FOR WITNESS ATTENDANCE FEES, TRAVEL, AND MISCELLANEOUS EXPENSES PART I - ATTENDANCE CERTIFICATION

		THAT I THE TANK TO BE U	ERTH TORT TOTAL		
General information     a. Witness Name     b. Witness Address     Street     City	Dawn Suppo	d. e. f.	Case Number	EEOC v. Costco 14 cv 0655 Chicago	21
c. US Citizen: Yes ( ) No  2. Travel and Attendance inforr a. Dates of Travel from Re b. Dates of Travel from Ca c. Dates of Attendance:	sidence to Case Location:	Fi	8/14/16 8/16/1 om 8/15/1	то <u>б</u> то	GCCHI161 <del>03467</del> 8/14/16 8/16/16 8/15/16
3. Feertife before the United States undura	y that the witness named above attended in t telwing in none than four witnesses were calle	Certificatio the case or matter indicate the case or matter indicate the magistrate also cert	d and is entitled to the sta	tutory allowances for attendance a certificate of the U.S. Attorney ive	nd travel. In the proceedings
<u> </u>	PART II	I - WITNESS CLAIM FOR FE	ES AND ALLOWANCES	- 0	
Attendance Fees     a. Fact, Pretrial Conference I     Total Attendance Fees	ā Detained Witness		Pate No. of	f Days Amount Claime	d Totals
Mileage Allowance (Indicate tage) (motorcycle) (af a. From Residence to Case L. b. From Hotel/Motel to Could Total Mileage Allowance	rplane) ocation (and Return) rt (or Court to Hotel/Motel)		Rate No. of	f Miles Amount Claime  \$	= , -0 -
3. Subsistance Per Diem is  . Meals b. Lodging  Total Subsistence Allow			Rate No. o	f Days Amount Claime	5 = 5/85.00
4. Miscellaneous Allowances (S a. Common Carrier b. Parking Fees, Tolls, Taxi F Total Miscellaneous Al  5. Total Amount Claimed (Items 6. Less Outstanding Check or Ca  7. Net Amount Claimed by With 8. Use this space to itemize your	Fares lowances 1-4, Part II) asis Advances ess expenses from Item 4, Part II above. Receipt	is are required for all com	mon carrier and parking fe	Amount Claime  \$    D. S.   Bridge   S.   S.   S.   S.   S.   S.   S.   S	\$ 290.50 \$ 290.50
all single items in excess of \$15.0	·			Paid by Cash (Signatur	\$ e of Payee)
				2	
9. I certify that the abs (was not) a citizen of the United Stravel.	ove data is correct and that payment has not i states. (If not a citizen, present your Alien Re	Witness Certific been received, and that at egistration Record with the	the time of travel and atte form.) I (did) (did not) re	endance I (was) (was not) a U.S. Government transportation  (	ernment employee and I (was) Request to pay for my official
	P	PART III - RESERVED FOR F	INANCE OFFICE		
	by Witness (From Item 7, Part II) by Differences (Explain Differences)			S. S.	\$
2	-0				
c. Amount Authorized for d. By  2. Accounting Classification	Title		Date		\$
L. ALLOUNTING CLASSINGATION	V019				



## Your Itinerary

## Trip on Aug 14, 2016

Locator: SMCKRN

Date: Aug 10, 2016

Traveler

**DAWN SUPPO** 

EEOC

THIS IS YOUR OFFICIAL RECEIPT FOR TRAVEL

PLEASE RETAIN FOR VOUCHERING OR

REIMBURSEMENT PURPOSES.

Customer Number

361MX3M

Agent

17

\*\*\*\*\*\*\*\*

TA RCVD FR JOYCE BARKSDALE-BY MI MARTINEZ

FEES TOTALING 33.07PP CHARGED IN ADDITION TO TKT PRICE

FEE-USD33.07PP-AIR DOMESTIC, TRADITIONAL

## Sunday, August 14, 2016

Confirmation SMCKRN



## Flight AMERICAN AIRLINES 1065

**DEPARTURE** 

FT LAUDERDALE, FL 7:00 AM, Aug 14, 2016 **ARRIVAL** 

CHICAGO/OHARE 9:14 AM, Aug 14, 2016

Status Class Duration Equipment

Coach Class - Y 03:14 (Non-stop) Boeing 737-800

Food For Purchase

Confirmed

Meal Service Reserved Seats

17D (Aisle)

Notes

DEP-TERMINAL 3 ARR-TERMINAL 3 ONEWORLD

#### Tuesday, August 16, 2016

Confirmation SMCKRN



## Flight AMERICAN AIRLINES 2409

DEPARTURE CHICAGO/OHARE 6:45 PM, Aug 16, 2016 ARRIVAL

FT LAUDERDALE, FL 10:50 PM, Aug 16, 2016

Status Class Duration Equipment Meal Service

Notes

Confirmed Coach Class - G 03:05 (Non-stop)

Boeing 737-800 Food For Purchase

DEP-TERMINAL 3 ARR-TERMINAL 3 ONEWORLD

SEAT ASSIGNMENT RESTRICTED TO AIRPORT CHECK-IN

<u>Name</u>	Invoice / Ticket / Date	Base	<u>Tax 1</u>	Tax 2	Tax 3	<u>Total</u>
SUPPO D SUPPO DAWN	183643/000SFCTRF/10AUG16 183643/0017853108221/10AUG16	33.07 383.26	56.94			33.07 440.20
		-		Total A	mount	473.27

Form of Payment: VIXXXXXXXXXXXXX3675

Thank you for riding with us! Date AFFL, INC. 243-2537 312-243-2537 checkertaxichicago.com 312-829-4222 yellowcabchicago.com



312-226-8880 bluediamondtaxi.com

773-248-7600 americanunitedtaxiaffiliation.com

# CAB RECEIPT TEASH taxiwithus com 303 TAXI DATE 08-16-2016 TIME 5-19 P.M. FROM Chicago down Town TO 03 HBER RIR PONT CAB # 6771 DRIVER LUCC CAB FARE \$ 53.00

MEMO

Accounting Classification Data

1157,107	17				OUS EXPENSES	ON		
				PART I - ATTENDAI	NCE CERTIFICATI	UN .		
a. b.	ral Information Witness Name Witness Addres Street City US Citizen: Yes (	Dawn /	M. SUPP ( ) Illegal ( )	00	f. Distric	Name Enumber It or Location	4CV 06553 Chicago	tco
2. Trave a. b.	l and Attendance Dates of Travel fr	information om Residence to Case Lo om Case Location to Resi	ation:		From From	12/9/16	To 72	2/9/16 1/22/16 2/22/16
3. before th	Ponted States Ma	certify that the witness and a second control of the certific that	named above attended four witnesses were c	in the case or matter in	ication dicated and is en o certifies that the	titled to the statutory a he approval and certifica	llowances for attendance and ate of the U.S. Attorney were	travel. In the proceedings first obtained.
	(Signature)			(Title	()	s' 9	(bate)	
			PAI	RT II - WITNESS CLAIM F	OR FEES AND AL	LOWANCES		
				60°	Rate	No. of Dave	Amount Claimed	<b>7-4-1-</b>
a. Fa	dance Fees ct, Pretrial Confer otal Attendance Fe	rence & Detained Witness				No. of Days	Amount Claimed	- s ーク ー
a. Fr b. Fr	auto) (motorcycle rom Residence to (	Case Location (and Return o Court (or Court to Hote	)	3	Rate	No. of Miles	Amount Claimed	- <u>, -0 -</u>
b. L	Aeals Lodging Total Subsistence Planeous Allowan	Diem Rate:  Allowance ces (See Item 8 Below)	or HRGA Rate:	on 12/9/169 12/10/16 th	* Rate 74	No. of Days	\$ 999 000	= <u>, 999</u> 00
b. Pi	ommon Carrier arking Fees, Tolle, Total Miscellane	ous Allowances	74.00	12/10/16 th	לבן נח	21/16	256.25	- 5256.15
6. Less C 7. Net Ai 8. Use th	Outstanding Check mount Claimed by	your expenses from Iten	14, Part II above. <i>Rec</i> o	eipts are required for al	l common carrie	and parking fees, and j	for Paid by Check No.	1,255.75
	······································	•					Paid by Cash	\$ 17
							(Signature o	of Payee)
							(Date)	
9. (was not) travel.	acitizen of the Ui	he above data is correct. nited States. (If not a cit	and that payment has n izen, present your Aller	ot been received, and ti	ertification hat at the time of th this form.) I (	f travel and attendance did) (did not) receive a C a (C C (Date)	I (was) (was not) a U.S. Gover iovernment transportation Re	nment employee and I (was) quest to pay for my official
				PART III - RESERVED	FOR FINANCE OF	FICE		
1. Cor a. b.		med by Witness (From It e to Any Differences (Exp	•			6 1	-	5
_	Amount Authori	red for Payment						
c. d.	Amount Authoriz  By	ed for rayment	Title			Date		\$
u,	-7		Title			Date		

## Your Itinerary

## Trip on Dec 22, 2016

Locator: XXFNYO

Date: Dec 21, 2016

Traveler

**DAWN M SUPPO** 

**EEOC** 

Customer Number

361MX3M

Agent

5)

FEES TOTALING 33.07PP CHARGED IN ADDITION TO TKT PRICE FEE-USD33.07PP-AIR DOMESTIC, TRADITIONAL

## Thursday, December 22, 2016

## Confirmation XXFNYO



## Flight AMERICAN AIRLINES 1055

CHICAGO/OHARE 3:30 PM, Dec 22, 2016

FT LAUDERDALE, FL 7:32 PM, Dec 22, 2016

ARRIVAL

Status

Class

Duration

Equipment

Meal Service

Reserved Seats

Notes

Confirmed

Coach Class - Y 03:02 (Non-stop)

Boeing 737-800

Food For Purchase

17C (Aisle)

**DEP-TERMINAL 3** ARR-TERMINAL 3

**ONEWORLD** 

Name SUPPO D SUPPO DAWN M

Invoice / Ticket / Date 241316/000SFCTRF/06DEC16

241316/0017928447237/06DEC16

Base 33.07 370.24

Tax 1

55.96

<u>Tax 3</u> Tax 2

**Total** 

33.07 426,20

**Total Amount** 

459.27

Form of Payment: VIXXXXXXXXXXXX3675

## **GENERAL INFORMATION**

THANK YOU FOR BOOKING WITH CWTSATOTRAVEL PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT CWTSATOTRAVEL PHONE RESERVATION 866-654-5522 HOURS OF BUSINESS ARE MON-FRI 7AM-10PM EASTERN FOR AN AFTER HOURS EMERGENCY, PLEASE CONTACT CWTSATOTRAVEL AT 866-654-5522 \*\*\*\*IF INTERNATIONAL 800 NUMBER DOES NOT WORK PLEASE\*\*\* \*\*\*\*\*\* CALL COLLECT TO 210-877-3219 \*\*\*\*\*\*\* RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT

FOR INFORMATION ON TSA SECURE FLIGHT PROGRAM VISIT www.tsa.gov

FOR AIRPORT SECURITY INFORMATION SEE WWW.TSA.GOV

UNUSED PAPER TICKETS MUST BE RETURNED TO CWTSATOTRAVEL CONTACT CWTSATOTRAVEL TO REFUND ELECTRONIC TICKETS FARES ARE NOT GUARANTEED UNTIL TICKETED

PLEASE VISIT WWW.CARLSONWAGONLIT.COM/AIRLINEBAGGAGEFEES FOR BAGGAGE FEE INFORMATION. CHECK OPERATING CARRIER

# GLOBE TAXI

CREDIT RECEIPT DRIVER: 00093540 CAB #1 0496 DATE : 12/09/16 TIME: 12:28-12:51 RATE #8 1

STANDARD RATE MILES R1: 16,60

TRIP#: 1022
FARE: \$40.75
EXTRAS: \$4.00

TECH. FEE: \$0.50

TIPS : \$7.00 TOTAL : \$52.25 VISA \*\*\*6740

AUTHOR, : 06056B MID :\*\*\*\*\*084

ENTRY METHOD: CONTACT CHIP

AID:

A0000000031010

APPL. NAME: CHASE VISA

ATC : 0090

AC:

C66F021B18BBB0D8 REC/INV#: 1022 TID: \*\*\*\*\*352

DESCRIPTION:

SIGNATURE:

SUPPO/DAWN CARDHOLDER ACKN- argent to

# From Court Louse

Flash Cab Cab #6588 773-561-4444 Chicaso, IL 12/12/16 17:36

DIST.... 1.10
FARE...\$ 9.00
TECH...\$ 9.50
TIP...\$ 4.00
EXTRAS.\$ 9.00

TOTAL..\$ 13.50

Visa xxxx6740 MID 445100500997 Auth ch\_1903LEG03LaAM HFe1cour1dA

No Signature
Required
Call 311 for
compliments and
complaints

# to Court house

--ORIGINAL--DISPATCH TAXI CAB # 0292 CUSTOMER COPY 12/12/16 TR 5094 START END MILES 08:36 08:53 1,2 FARE: \$ 9.50 EXTRA: \$ 0.00 TOLL: \$ 0.00 SRCH: \$ 0.00 TIP: \$ 4.00 FEE: \$ 0.50 TOTAL: \$ 14.00

CARD: 6740 AUTH: 02904B

CALL 311 FOR COMPLIMENTS OR COMPLAINTS

# to Court Louise

----SUN TAXI-----CREDIT RECEIPT-PASSENGER COPY HACK#: 00086539 CAB#: 4207 DATE: 12/13/2016 ST. TIME: 08:46 END TIME: 08:57 TRIP#: 17130 DIST: 1.20 MI FARE: \$ 7.75 EXTRA : \$ 0.00 TECH FEE:\$ 0.50 TIP : \$ 2.00 GR. TOT: \$ 10.25 VISA \*\*\*\*6740 AUTH#: 05229B . CALL 311 FOR COMPLIMENTS OR COMPLAINTS

to Courthouse

## SUN TAXI

PASSENGER COPY CARD RECEIPT

MID:

00720000200108

TID: P288924029

DR. ID: 00088826

CAB#: 1368

DATE: 12/14/2016

ST. TIME: 09:09

END TIME: 09:21

PASS#:

TRIP#: 2494 DIST.: 1,20 MI

RATE 1

FARE: \$ 8.00

\$ 0.00 EXTRA:

TIP: \$ 3.00

SUBTOTAL:

\$ 11.00

TECH. FEE:\$ 0.50

TOTAL: \$ 11.50

CARD#: \*\*\*\*8904

AUTH#: 012310

**ENTRY METHOD:** 

CONTACT CHIP

AID:

A0000000031010

APPL. NAME:

VISA DEBIT

ATC: 000B

AC:

7B49437FLD628DA5

CALL SIL FOR COMPLIMENTS from court

CHICAGO CARRIAGE CAB

312-326-2221

\*\*\*\*CREDIT CARD SALE\*\*\*

\*\*\*\*\*\*\*\*\*\*\*\*\*
ENTRY METHOD:
CONTACT CHIP
AID:
APPLICATION ID:
CHASE VISA
ATC:
BEFF1B2E91CBE16

TERMINAL DGL260890365

001260890365 DRIVER 101828 CAB 577 PASSENGERS UATE 12/15/2016 18:25 16109+28 END 16122:13 TRIP 1199 STANDARD RATE 1 DISTANCE 1.17 mi FARE R1 \$8.25 EXTRA \$1.00 TOLL **承**回。00 SUB TOTAL \$9.25 TIP \$4.00 TECHNOLOGY FEE: \*0.50 TOTAL 也有。61年 SALE \*\*\*\*\*\*\*\*\*\*\*\* AUTH 083048 

CALL 311 FOR COMPLIMENTS OR COMPLAINTS, 12/14/16 22:46
Flash Cab
Cab #2426
773-561-4444
Chicago, IL
12/15/16 14:06

DIST....\$ 1.10
FARE...\$ 6.25
TECH...\$ 0.50
TIP....\$ 3.00
EXTRAS.\$ 0.00

TOTAL..\$ 9.75

Visa xxxx6740
MID 445100500997
Auth
ch\_19R5UXGQ3LaAM
HFPHlvo9yJN

No Signature
Required
Call 311 for
Compliments and
complaints

from Court

--ORIGINAL--CHOICE TAXI CAB # 1582 CUSTOMER COPY 12/16/16 TR 2916 START END MILES 15:37 15:48 1.1 7.50\$ FARE: EXTRA: \$ 0.00 TOLL: \$
SRCH: \$ 0.00 0.00 TIP: \$ 2.00 FEE: \$
TOTAL: \$ 0.50 10.00

6740 CARD: AUTH: 05682B

CALL 311 FOR COMPLIMENTS OR COMPLAINTS

So Court

P 55 N ER COPY C R ECEIPT

MID:

00720000302094 TID: P261049549

DR. D: 10064559

147

CA #:

DATE: 12/16/2016

ST, TIME: 08:37

08:50 END TIME:

PASS#:

640 TRIP#:

DIST.: 1.20 MI

RATE 1

\$ 8.50 FARE:

\$ 0.00 EXTRA:

\$ 3.00 TIP:

SUBTOTAL:

11,50

TECH. FEE.\$ 0.50

TOTAL: \$ 12,00

CARD#: \*\*\*\*6740

AUTH#: 03218B

ENTRY METHOD:

CONTACT CHIP

AID:

A0000000031010

APPL. NAME:

CHASE VISA

0093 ATC:

AC:

78907C0F86492724

from Court

RHICAGO CARRIAGE CAB

\*\*\*\*CREDIT CARD SALETER \*\*\*

CONTACT CHIP

ALD: ACGGGGGGGGA1G1G

Application 10:

CHASE UISA

ATC: 0095 AC: 0E7F062E343D8A1D

TERMINAL 001260859371

ORIVER 84183

CAB 526

PASSENGERS 1

DATE 12/19/2016 15:55

START 02:00:57 END 02:07:43

TRIP 736

STANDARD RATE 1

DISTANCE 1.14 mi FARE R1 \$6.60 EXTRA \$0.00

TOLL \$0.00

SUB TOTAL \$6.50

TIP
TECHNOLOGY FEE: \$0.50

TOTAL \$9.00

BALE \*\*\*\*\*\*\*\*\*\*\*

AUTH 05358B

1. \*\*\*\*\*\*\*\*\*\*\*\*\*\*

CALL 311

FOR COMPLIMENTS OR COMPLAINTS.

to Court

Flash Cab Cab #4618 773-561-4444 Chicago: IL 12/19/16 08:53

DIST....\$ 1.10 FARE...\$ 9.00 TECH...\$ 0.50 TIP....\$ 3.00 EXTRAS.\$ 0.00

TOTAL .. \$ 12,50

Visa xxxx6740 MID 445100500997 Auth ch\_1955UeGQ3LaAM HFPC1Je31AY

No Signature
Required
Call 311 for
Compliments and
Complaints

So Court

YELLOW CAB

CAB NUMBER 1601

12/20/16 TR 3705

START END MILES

08:35 08:53 1.2

RATE #1

FARE: \$ 9.75

EXTRA: \$ 0.00

TOTAL: \$ 9.75

CALL 311 FOR

COMPLIMENTS OR

COMPLAINTS

ro.. / rat / tat / \*\*\*\*\*\*\*CASH CALL CALL CALL OR COMPLIME. OR COMPLAINTS.

Aum Court

CHICAGO CARRIAGE CAR 312-326-2221 \* CAB CAB ORIVER 93211 TERMINAL COLEGO388696 TRIP PASSENGERS DATE 12/20/2018 17:13 分下台包工 08:07:25 END ប៉ង់៖2០:na STAMDARD RATE 1. DISTANCE 1.45 mi FARE R1 \$8.50 EXTRA \*0.00 TOLL \$0.00 SUB TOTAL \$8.50 TOTAL \$8.50 朱丰未来未来口切合日 占巨匹巨工占土米丰未来次 CALL 311 FOR COMPLIMENTS OR COMPLAINTS.

- Con-Larnts

toCourt

CHECKER TAXI

CAB# 5145

12/21/16 16:58

12/21/16 17:07

12/02

TRIP # 12002

DIST 1.12 mi
\$ 7.25

FARE \$ 3.00

TOTAL \$ 10.25

CALL 311 FOR

COMPLIMENTS OF

COMPLIMENTS OF

From Court

NOVA TAXI AFFILIATION \*\*\*\*\*\*\*\*\*\* 3550 CAB CAB
DRIVER 93795
TERMINAL 00L261005800 189 TRIP PASSENCERS 12/21/16 18:10 DATE 17:64:55 START 18:07:46 END STANDARD 度育丁臣 1 27 mi DISTANCE 48,25 FARE RI \*1.00 EXTRA \$0.00 TOLL 49.25 SUB TOTAL 49.25 丁面下自し 米米苯米米尼内密州 尼尼尼尼工产丁米米米米米 CALL 311 FOR COMPLINENTS OR COMPLAINTS

# YELLOW CAB

# DRIVER COPY CARD RECEIPT

MID:

00720000302094

TID: P261049549

DR. ID: 10041669

147 CAB#1

DATE: 12/22/2016

ST. TIME: 12:31

END TIME: 13:03

PASS#

808

TRIP#: DIST.: 17,00 MI

RATE 1

\$ 42.00 FARE:

\$ 0.00 EXTRAL

\$ 8.00 TIPS

SUBTOTAL:

50.00

TECH, FEE:\$ 0,50

TOTAL: \$ 50.50

CARD#: \*\*\*\*6740

09967B AUTH#;

ENTRY METHOD:

CONTACT CHIP

AID:

A0000000031010

APPL. NAME:

CHASE VISA

ATC:

0097

AC:

ejyasikasikan handinakan e

CARDHOLDER ACINION FORES to aurport

4-9822 - 2659941 6000



Invoice #: 0171418579 Date: 6/23/2015 Customer #: 1740263

10:

US EEOC US EEOC 500 W MADISON ST STE 2000 CHICAGO, IL 60661-2592 Bill to:

US EEOC US EEOC 500 W MADISON ST STE 2000 CHICAGO, IL 60661-2592 Records from:

NORTHSHORE MEDICAL GROUP 4901 SEARLE PKWY SUITE 170 SKOKIE, IL 60077

Requested By: US EEOC
Patient Name: SUPPO DAWN

DOB:

071569

**SSN:** 320505982

Description		Quantity	Unit Price	Amount
Basic Fee Retrieval Fee Per Page Copy (Paper) 1 Shipping Subtotal Sales Tax Invoice Total Balance Due		1052	0.00	10.00 0.00 0.00 10.00 0.00 10.00 10.00
P	ay your invoice online at <u>w</u>	ww.HealthPortP	av.com	
erms: Net 30 days	Please remit this			

HealthPort

P.O. Box 409822 Atlanta, GA 30384-9822 Fed Tax ID 58 - 2659941 (770) 754 - 6000

Invoice #	: 0171418579
Check #	
Payment	Amount \$

Please return stub with payment.

Please include invoice number on check.

To pay invoice online, please go to <a href="www.HealthPortPay.com">www.HealthPortPay.com</a> or call (770) 754 6000. Email questions to <a href="mailto:Collections@healthport.com">Collections@healthport.com</a>.

B. LBUL BAHUGUNA NIL

PSYCHIATRY

Billing surnier FOR PROFESSIONAL SERVICES for DAWN SUPPO BY SUPPO CHARGES
John CARTER 6/8715- Billing - \$40.00
MSW2
3
4,
5.
TOTAL 4 40-00
PAYMENT RECEIVED NONE
Signature of M.D.
Please wait & 40,00 to
That you ! (by check)

**PSYCHIATRY** 

## FOR PROFESSIONAL SERVICES

DATE CHARGES

1. 1/17/15- Records \$80.00

Dawn Suppo

2. TOTAL \$80.00

PAYMENT RECEIVED NO NE

Signature of M.D.

L 60035

33

1/17/15

h on

ckrge-

my office.

D

25/

APort

Box 409822

anta, GA 30384-9822

ad Tax ID 58 - 2659941

(770) 754 - 6000



Invoice #: 0163627399 Date: 2/16/2015 Customer #: 1740263

S	hi	-	+~	٠
0	ш	u	w	

RICHARD MRIZEK US EEOC 500 W MADISON ST STE 2000 CHICAGO, IL 60661-2592 Bill to:

RICHARD MRIZEK US EEOC 500 W MADISON ST STE 2000 CHICAGO, IL 60661-2592 Records from:

NSUHS HIGHLAND PARK HOSPITAL 4901 SEARLE PKWY SUITE 170 SKOKIE, IL 60077

Requested By: US EEOC

Patient Name: SUPPO DAWN

DOB: SSN: 071569 320505982

## RECEIVED EEOC

Description	1,22,017	Quantity	Unit Price	Amount
Basic Fee Retrieval Fee Per Page Copy (Paper) 1 Shipping Subtotal Sales Tax Invoice Total Balance Due	CHICAGO DISTRICT (	FFICE 363	0.00	10.00 0.00 0.00 0.00 10.00 0.00 10.00
	Pay your invoice online at ww	∟ /w.HealthPortF	Pay.com	
Terms: Net 30 days	Please remit this a	mount : \$ 1	0.00 (USD)	

## HealthPort

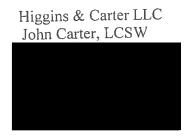
P.O. Box 409822 Atlanta, GA 30384-9822 Fed Tax ID 58 - 2659941 (770) 754 - 6000

Invoice #: <b>0163627399</b>	
Check #	
Payment Amount \$	

## Please return stub with payment.

Please include invoice number on check.

To pay invoice online, please go to <a href="www.HealthPortPay.com">www.HealthPortPay.com</a> or call (770) 754 6000. Email questions to <a href="mailto:Collections@healthport.com">Collections@healthport.com</a>.



# Invoice

Date	Invoice #
1/29/2015	4816-4818

Terms
Net 30

## Bill To:

Equal Empolyment Opportunity Commision

Description	Service Date	Amount
EEOC MEDICAL RECORD REQUEST FEE: DAWN SUPPO	1/29/2015	25.00
Remit Payment To Above Address.  For Billing Questions, Contact: Alexis at 312-360-1983 Ext. 8	Balance Du	ie: \$25.00

# THOMPSON COURT REPORTERS, INC. (312) 421-3377

Laura R. Feldman
Equal Employment Opportunity Commission (EEOC)
Interior Business Center
EEOC Invoice Processing Team
7301 W Mansfield Ave, Mail Stop D 2770
Denver CO 80235

## INVOICE

Invoice No.	Invoice Date	Job No.
16262	8/13/2015	8369
Job Date	Case	No.
5/29/2015	14 C 6553	
	Case Name	
EEOC v. Costco		
	Payment Terms	
Due upon receipt		

@

2.45

0.30

0.00

0.00

0.00

519.40

24.30

0.00

0.00

0.00

\$543.70

## 1 CERTIFIED COPY OF TRANSCRIPT OF:

Wendy Davis

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E-Transcript (complimentary)

Transcript - PDF (complimentary)

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7301 W Mansfield Ave, Mail Stop D 2770
Denver CO 80235

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: 16262

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81.00 Pages

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Invoice Date

: 8/13/2015

**Total Due** 

\$543.70

Job No.

: 8369

BU ID

: 1-MAIN

Case No.

Case IV

: 14 C 6553

Chicago IL 60607

Case Name



Rich Mrizek
Equal Employment Opportunity Commission (EEOC)
Interior Business Center
EEOC Invoice Processing Team
7301 W Mansfield Ave, Mail Stop D 2770
Denver CO 80235

## INVOICE

Invoice No.	Invoice Date	Job No.	
16116	6/25/2015	8379	
Job Date	Case No.		
6/11/2015	14 C 6553		
	Case Name		
EEOC v. Costco			
	Payment Terms		
Due upon receipt			

ORIGINAL TRANSCRIPT OF:

Krlsten D'Agostino

Hourly

Exhibits - scanned (B & W)

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ASCII (complimentary)

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Reference No.

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	7.50	Hours	@	42.50	318.75
6	9.00	Pages	@	0.30	20.70
				7.00	7.00
				0.00	0.00
				0.00	0.00
			**	0.00	0.00

TOTAL DUE >>>

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Phone: 312-869-8000 Fax:312-869-8124

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Rich Mrizek

Equal Employment Opportunity Commission (EEOC)

Interior Business Center EEOC Invoice Processing Team

7301 W Mansfield Ave, Mail Stop D 2770

Denver CO 80235

Invoice No.

: 16116

Invoice Date

: 6/25/2015

Total Due

: \$996.05

Job No.

: 8379

BU ID

: 1-MAIN

Case No.

: 14 C 6553

Case Name

: EEOC v. Costco

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Suite 2F

Chicago IL 60607



Laura R. Feldman
Equal Employment Opportunity Commission (EEOC)
Interior Business Center
EEOC Invoice Processing Team
7301 W Mansfield Ave, Mail Stop D 2770
Denver CO 80235

# INVOICE

Invoice No.	Invoice Date	Job No.
16177	7/1/2015	8370
Job Date	Case	No.
6/26/2015	14 C 6553	
	Case Name	
EEOC v. Costco		
	Payment Terms	
Due upon receipt		

Igor Anic

Hourly (no transcript)

Reference No.

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Laura R. Feldman
Equal Employment Opportunity Commission (EEOC)
Interior Business Center
EEOC Invoice Processing Team
7301 W Mansfield Ave, Mail Stop D 2770
Denver CO 80235

Invoice No.

16177

Invoice Date

: 7/1/2015

Total Due

: \$595.00

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1017 W. Washington Blvd.

Suite 2F

Remit To:

Chicago IL 60607

Job No.

8370

BU ID

: 1-MAIN

Case No.

: 14 C 6553

Case Name

# COURT REPORTERS 312-421-3377

Laura R. Feldman Equal Employment Opportunity Commission (EEOC) Interior Business Center EEOC Invoice Processing Team 7301 W Mansfield Ave, Mail Stop D 2770 Denver CO 80235

## INVOICE

Invoice No.	Invoice Date	Job No.
16201	7/14/2015	8370
Job Date	Case	No.
6/26/2015	14 C 6553	
	Case Name	
EEOC v. Costco		
	Payment Terms	<del></del>
Due upon receipt		

100 000000						
1 CERTIFIED COPY OF TRANSCRIPT OF:						
Igor Anic		134.00	Pages	@	2.45	328.30
Exhibits - scanned (B & W)		55.00	Pages	@	0.30	16.50
ASCII (complimentary)	773				0.00	0.00
E-Transcript (complimentary)	17 A				0.00	0.00
Transcript - PDF (complimentary)					0.00	0.00
1 CERTIFIED COPY OF TRANSCRIPT OF:	A.对 30A.					
Greg West`		141.00	Pages	@	2.45	345.45
Exhibits - scanned (B & W)		58.00	Pages	@	0.30	17.40
ASCII (complimentary)					0.00	0.00
E-Transcript (complimentary)					0.00	0.00
Transcript - PDF (complimentary)					0.00	0.00
		TOTAL	. DUE >>>	•		\$707.65
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Suite 2F

1017 W. Washington Blvd.

Invoice No.

: 16201

Invoice Date

7/14/2015

**Total Due** 

: \$707.65

Job No.

: 8370

**BU ID** 

: 1-MAIN

Case No.

: 14 C 6553

Chicago IL 60607

Case Name



Laura R. Feldman Equal Employment Opportunity Commission (EEOC) Interior Business Center EEOC Invoice Processing Team 7301 W Mansfield Ave, Mail Stop D 2770 Denver CO 80235

# INVOICE

Invoice No.	Invoice Date	Job No.
16081	6/8/2015	8369
Job Date	Case	No.
5/29/2015	14 C 6553	
	Case Name	
EEOC v. Costco		
	Payment Terms	
Due upon receipt		

Wendy Davis

Hourly

5.00 Hours

TOTAL DUE >>>

@

42.50

212.50 \$212.50

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Laura R. Feldman

Tax ID: 36-4546623

Equal Employment Opportunity Commission (EEOC)

Interior Business Center 3 EEOC Invoice Processing Team

7301 W Mansfield Ave, Mail Stop D 2770

Denver CO 80235

Invoice No.

: 16081

Invoice Date

: 6/8/2015

**Total Due** 

: \$212.50

Remit To: Thompson Court Reporters, Inc.

1017 W. Washington Blvd.

Suite 2F

Chicago IL 60607

Job No.

: 8369

BU ID

: 1-MAIN

Case No.

: 14 C 6553

Case Name



Laura R. Feldman Equal Employment Opportunity Commission (EEOC) Interior Business Center EEOC Invoice Processing Team 7301 W Mansfield Ave, Mail Stop D 2770

# INVOICE

Invoice No.	Invoice Date	Job No
16067	6/4/2015	8343
Job Date	Case	No.
5/20/2015	14 C 6553	
	Case Name	
EEOC v. Costco	~	
	Payment Terms	
Due upon receipt		

## ORIGINAL TRANSCRIPT OF:

Daniro Hernandez

Denver CO 80235

Hourly

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Transcript - PDF (complimentary)

Reference No.

: EECFPCHI15100882

Job #14CHI010

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TOTAL DUE >>> \$453.00

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Laura R. Feldman Equal Employment Opportunity Commission (EEOC) Interior Business Center EEOC Invoice Processing Team 7301 W Mansfield Ave, Mail Stop D 2770 Denver CO 80235

Invoice No.

16067

Invoice Date

6/4/2015

**Total Due** 

\$453.00

Remit To: Thompson Court Reporters, Inc.

1017 W. Washington Blvd.

Suite 2F

Chicago IL 60607

Job No.

: 8343

BU ID

: 1-MAIN

Case No.

14 C 6553

Case Name

# sien Mangio, LLC

ideo e, Suite 1820 8101-4001

06) 622-6875

Fax: (206) 343-4110

Job #: 150617LSP

Job Date: 06/17/15 Order Date: 06/17/15

DB Ref.#:

Date of Loss: Your File #:

Your Client:

Invoice

Invoice #:

71025

Inv.Date:

07/13/15

Balance:

\$1,262.55

Bill To:

Joyce Barksdale

**EEOC** - Chicago District Office 500 West Madison Street

**Suite 2000** 

Chicago, IL 60661

**Equal Employment Opportunity Commission** Action:

Costco Wholesale Corporation

Action #: 14-cv-06553

Rep: LSP

2378

		Cert:	23/8				
Item	Proceeding/Witness	Description	Units	Quantity	Price		Amount
2 3 4 5 6 7 8 9	Michele Hughes Sophia Terada Michele Hughes Michele Hughes Michele Hughes Sophia Terada Sophia Terada Sophia Terada	Appearance Appearance Original & 1 Certified Transcript Electronic Transcript Conversion Exhibit Scanning Original & 1 Certified Transcript Electronic Transcript Conversion Exhibit Scanning Delivery of Original Transcript	Hours Hours Pages Unit Pages Unit Labor	2.50 4.50 60 1.00 29.00 102 1.00 68.00 1.00	\$65.00 \$65.00 \$4.10 \$37.50 \$0.55 \$4.10 \$37.50 \$0.55 \$15.00		\$162.5 \$292.5 \$246.0 \$37.5 \$15.9 \$418.2 \$37.5 \$37.4 \$15.0
	Comments: Purchase Order #: EECFPCHI15101057					ub Total	\$1,262.55
Please include the invoice number with your payment. Thank you. We really appreciate your business!					Shipping		\$0.00
		Thank you. We really appre	ciale your bus	siness!		Tax [	\$0.00
					Total I	Invoice	\$1,262.55
Federa	Federal Tax I.D.: 42-1604663				P	ayment	\$0.00
Terms: After 30 Days 1% Finance Charge Applied			Annlied	D-I	[	44.000.00	

Please KEEP THIS PART for YOUR RECORDS. Please FOLD then TEAR HERE and RETURN THIS PART with PAYMENT.

Bill To:

Joyce Barksdale **EEOC** - Chicago District Office 500 West Madison Street **Suite 2000** 

Chicago, IL 60661

Deliver To:

Terms: After 30 Days 1% Finance Charge Applied.

Richard Mrizek

**EEOC - Chicago District Office** 

500 West Madison Street

**Suite 2000** 

Chicago, IL 60661

Invoice

Phone: (206) 622-6875

Fax: (206) 343-4110

Inv.Date: 07/13/15 Balance: \$1,262.55

Invoice #: 71025

Job #: 150617LSP

11

Job Date: 06/17/15

**Balance Due** 

\$1,262.55

DB Ref.#: Date of Loss:

Your File #: Your Client:

Yamaguchi Obien Mangio, LLC Court Reporting & Video 1200 Fifth Avenue, Suite 1820 Seattle, WA 98101-4001

## aguchi Obien Mangio, LLC

Reporting & Video Fifth Avenue, Suite 1820 (le, WA 98101-4001

Joyce Barksdale

Chicago, IL 60661

500 W. Madison Street

**EEOC - Chicago District Office** 

ne: (206) 622-6875

Bill To:

Suite 2000

Fax: (206) 343-4110

Job #: 150618BED

Job Date: 06/18/15 Order Date: 06/18/15

DB Ref.#:

Date of Loss: //

Your File #:

**Invoice** 

Invoice #:

70845

Inv.Date: Balance:

07/06/15 \$320.50

Your Client:

Action: Equal Employment Opportunity Commission

VS

**Costco Wholesale Corporation** 

Action #: 14-cv-06553

Rep: BED
Cert: 3109

	Proceeding/Witness	Description	Units	Quantity	Price		Amount	
1	Donald Currier	Appearance						
2	Donald Currier	Certified Transcript	Certified Transcript Pages 48					
3	Donald Currier	Electronic Transcript Conversion	Electronic Transcript Conversion Conv 1.00					
4	Donald Currier	Exhibit Scanning	Unit	12.00	\$0.55		\$6.60	
	nents:	,		·		Sub Total		
Purcl	nase Order#: EECFPCHI15101057					Sub Total Shipping	\$320.50 \$0.00	
Purch Pleas	nase Order #: EECFPCHI15101057 e include the invoice number with y	, your payment. Thank you. We really appre	eciate your					
Purcl	nase Order #: EECFPCHI15101057 e include the invoice number with y		eciate your			Shipping	\$0.00	
Purch Pleas	nase Order #: EECFPCHI15101057 e include the invoice number with y		eciate your		Tota	Shipping Tax	\$0.00 \$0.00	

Please FOLD then TEAR HERE and RETURN THIS PART with PAYMENT.

Bill To:
Joyce Barksdale
EEOC - Chicago District Office
500 W. Madison Street
Suite 2000
Chicago, IL 60661

<u>Invoice</u>

Deliver To:
Richard Mrizek
EEOC - Chicago District Office
500 West Madison Street
Suite 2000
Chicago, IL 60661

Phone: (206) 622-6875

Fax: (206) 343-4110

Inv.Date: 07/06/15
Balance: \$320.50

Job #: 150618BED

Job Date: 06/18/15

Invoice #: 70845

DB Ref.#:
Date of Loss: | |
Your File #:
Your Client:

Yamaguchi Obien Mangio, LLC Court Reporting & Video 1200 Fifth Avenue, Suite 1820 Seattle, WA 98101-4001

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095 Fed. Tax ID: 20-3132569



Bill To: Richard J. Mrizek

**Equal Employment Opportunity Commission (EEOC)** 

500 West Madison Street

**Suite 2000** 

Chicago, IL, 60661-2592

Invoice #:

CHI2765678

**Invoice Date:** 

10/6/2016

**Balance Due:** 

\$1,043.55

Case:

Equal Employment Opportunity Commission v. Costco

Wholesale Corporation

Job #:

2450433 | Job Date: 9/27/2016 | Delivery: Normal

Billing Atty: Richard J. Mrizek

Location:

Northwestern Medical Group

446 E. Ontario | Suite 7-200 | Chicago, IL 60611

Sched Atty: Erin Foley | Seyfarth Shaw LLP

Witness	Description		Amount
Stephen Dinwiddie , M.D.	Transcript Services		\$854.75
Ctephen Dinwiddie , M.D.	Exhibit Management		\$188.80
Notes:		Invoice Total:	\$1,043.55
		Payment:	\$0.00
		Credit:	\$0.00
	Interest:		\$0.00
MS* Pavable upon receipt Access		Balance Due:	\$1,043.55

Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services consult http://www.veritext.com/services/services/services-information

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Invoice #:

CHI2765678

Job #:

2450433

**Invoice Date:** 

10/6/2016

Balance:

\$1,043.55

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095 Fed. Tax ID: 20-3132569



Bili To: Laura Feldman

Equal Employment Opportunity Commission 500 West Madison Street

Suite 2000

Chicago, IL, 60661-2592

invoice #:

CHI2576026

invoice Date:

3/11/2016

Balance Due:

\$122.50

Case:

Equal Employment Opportunity Commission v. Costco

Wholesale Corporation

Job #:

2070216 | Job Date: 5/27/2015 | Delivery: Normal

Billing Atty: Laura Feldman Seyfarth Shaw LLP

Location:

131 S Dearborn St. | Suite 2400 | Chicago, IL 60603-5577

Sched Atty: Erin Foley | Seyfarth Shaw LLP

Witness	Description	Unita	Quantity	Price	Amount
Thad Thompson	Video - Digitizing & Transcript Synchronization	Hour	5.00	\$20.00	\$100.00
	Shipping & Handling - Video Media	Package	1.00	\$22.50	\$22.50
Notes: PO # EECFP	CHI15101421		lnv	oice Total;	\$122.50
				Payment	\$0.00
				Creditu	
			-725752MSRels	Oledica	\$0.00
				Interest	\$0.00 \$0.00

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/service-information

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P.O. Box 71303 Chicago IL 60694-1303 invoice #:

CHI2576026

Job#: Invoice Date:

2070216 3/11/2016

Balance:

\$122.50

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095 Fed. Tax ID: 20-3132569



Bill To: Joyce Barksdale

**Equal Employment Opportunity Commission** 

500 West Madison Street

Suite 2000

Chicago, IL, 60661-2592

Invoice #:

CHI2501184

Invoice Date:

12/15/2015

**Balance Due:** 

\$397.50

Case:

Equal Employment Opportunity Commission v. Costco

Wholesale Corporation

Job #:

2070216 | Job Date: 5/27/2015 | Delivery: Normal

Location:

Billing Atty: Joyce Barksdale

Sevfarth Shaw LLP

131 S Dearborn St. | Suite 2400 | Chicago, IL 60603-5577

Sched Atty: Erin Foley | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount
Thad Thompson	Video – MPEG/Digitizing		5.00	\$75.00	\$375.00
	Shipping & Handling - Video Media	Package	1.00	\$22.50	\$22.50
Notes: PO #: EECFP	CHI15101421		Inve	oice Total:	\$397.50
				Payment:	\$0.00
				Credit:	\$0.00
				Interest:	\$0.00
			Bal	ance Due:	\$397.50

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/all-services/service-information

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Invoice #:

CHI2501184

Job #:

2070216

Invoice Date:

12/15/2015

Balance:

\$397.50

## ntext Midwest

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095

Fed. Tax ID: 20-3132569



Bill To:

Laura Feldman

**Equal Employment Opportunity Commission** 

500 West Madison Street

Suite 2000

Chicago, IL, 60661-2592

Invoice #:

CHI2390098

Invoice Date:

8/5/2015

**Balance Due:** 

\$369.05

Case:

US EEOC v. Costco Wholesale Corp.

Job #:

2102288 | Job Date: 7/16/2015 | Delivery: Normal

Billing Atty: Laura Feldman

Location:

GLENBROOK HOSPITAL 1250 Pfingsten Rd | Conf Rm GB,

Room 1A | Glenview, IL 60026

Sched Atty: | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount	
Dr. Mariam Mourad	Certified Transcript - Medical, Technical & Video	Page	110.00	\$3.25	\$357.50	
	Exhibits	Per Page	21.00	\$0.55	\$11.55	
Notes: PO # EECFPC	CHI15101421		Invo	ice Total:	\$369.05	
				Payment:	\$0.00	
				Credit:	\$0.00	
			1 - W	Interest:		
			Bala	ince Due:	\$369.05	

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/all-

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Invoice #:

CHI2390098

Job #:

2102288

Invoice Date:

8/5/2015

Balance:

\$369.05

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095 Fed. Tax ID: 20-3132569

## RECV'D EEOC

AUS 1 8 2015

## CHI LEGAL DEPT



Bill To:

Laura Feldman

**Equal Employment Opportunity Commission** 

500 West Madison Street

**Suite 2000** 

Chicago, IL, 60661-2592

Invoice #:

CHI2390098

**Invoice Date:** 

8/5/2015

**Balance Due:** 

\$369.05

Case:

US EEOC v. Costco Wholesale Corp.

Job #:

2102288 | Job Date: 7/16/2015 | Delivery: Normal

Billing Atty: Laura Feldman

Location:

GLENBROOK HOSPITAL 1250 Pfingsten Rd | Conf Rm GB,

Room 1A | Glenview, IL 60026

Sched Atty: | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount	
Dr. Mariam Mourad	Certified Transcript - Medical, Technical & Video	Page	110.00	\$3.25	\$357.50	
	Exhibits	Per Page	21.00	21.00 \$0.55		
Notes: PO # EECFPC	CHI15101421	Invo	ice Total:	\$369.05		
				Payment:	\$0.00	
				Credit:		
				Interest:		
Balance Due:						

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/allservices/service-information

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Invoice #:

CHI2390098

Job #:

2102288

**Invoice Date:** 

8/5/2015

Balance:

\$369.05

#### kt Midwest

h Franklin Street, Suite 3000 ago IL 60606 1. 312.442.9087 Fax. 312.442.9095 ed. Tax ID: 20-3132569



Bill To:

Richard J. Mrizek

**Equal Employment Opportunity Commission** 

500 West Madison Street

**Suite 2000** 

Chicago, IL, 60661-2592

Invoice #:

CHI2370730

**Invoice Date:** 

7/13/2015

**Balance Due:** 

\$1,300.15

Case:

Equal Employment Opportunity Commission v. Costco

Wholesale Corp.

Job #:

2094691 | Job Date: 6/25/2015 | Delivery: Normal

Billing Atty: Richard J. Mrizek

Location: Seyfarth Shaw LLP

131 South Dearborn Street | Suite 2400 | Chicago, IL 60603-

Sched Atty: Sara Eber Fowler | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount
D 0	Certified Transcript	Page	415.00	\$2.95	\$1,224.25
Dawn Suppo	Exhibits	Per Page	138.00	\$0.55	\$75.90
Notes:			Invo	ice Total:	\$1,300.15
				Payment:	\$0.00
			Table 1	Credit:	\$0.00
				Interest:	
			Bala	ance Due:	\$1,300.15

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/allservices/service-information

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Invoice #:

CHI2370730

Job #:

2094691

**Invoice Date:** 

7/13/2015

Balance:

\$1,300.15

#### dwest

ranklin Street, Suite 3000 go IL 60606 el. 312.442.9087 Fax. 312.442.9095

Fed. Tax ID: 20-3132569



JUL 2 7 2015

CHI LEGAL DEPT

Laura Feldman Bill To:

**Equal Employment Opportunity Commission** 

500 West Madison Street

Suite 2000

Chicago, IL, 60661-2592

Invoice #:

CHI2372223

**Invoice Date:** 

7/14/2015

**Balance Due:** 

\$610.45

Case:

EEOC v. Costco Wholesale Corporation

Job #:

2092579 | Job Date: 6/27/2015 | Delivery: Normal

Billing Atty: Laura Feldman

Location:

332 Skokie Valley Road | Suite 225A | Highland Park, IL 60035

Sched Atty: Sara Eber Fowler | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount
Bulbul Bahuguna, M.D.	Certified Transcript - Medical, Technical & Video	Page	177.00	\$3.25	\$575.25
Bulbul Ballugulia, M.D.	Exhibits	Per Page	64.00	\$0.55	\$35.20
Notes: PO # EECFPC	HI15101421	·	Inv	oice Total:	\$610.45
				Payment:	\$0.00
				Credit:	
				SATURD STATE OF THE PROPERTY OF THE	\$0.00
				Interest:	\$0.00

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/all-services/service-information

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Invoice #:

CHI2372223

Job#:

2092579

**Invoice Date:** 

7/14/2015

Balance:

\$610.45

JUL 2 8 2015

CHI2367258

7/9/2015

\$1,845.35

#### RECV'D EEOC

#### **Veritext Midwest**

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095

Fed. Tax ID: 20-3132569

02 2015

CHI LEGAL DEPT



Invoice #:

Invoice Date:

**Balance Due:** 

REEV'S EEOC

0.2.205

WHI LEWAL DEPT

Richard J. Mrizek

Equal Employment Opportunity Commission

500 West Madison Street

Suite 2000

Chicago, IL, 60661-2592

Equal Employment Opportunity Commission v. Costco

Case:

Bill To:

Wholesale Corporation

Job #:

2074277 | Job Date: 6/22/2015 | Delivery: Normal

Billing Atty:

Richard J. Mrizek

Location:

Veritext - Boca Raton 301 NE 51st St (Yamoto Rd) | Ste 1240 | Boca Raton, FL 33431

Sched Atty: Sara Eber Fowler | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount
	Certified Transcript - Medical, Technical & Video	Page	145.00	\$3.30	\$478.50
Aviva Suppo	Rough Draft	Page	127.00	\$1.50	\$190.50
	Certified Transcript - Medical, Technical & Video	Page	245.00	\$3.30	\$808.50
Martin Suppo	Exhibits	Per Page	77.00	\$0.55	\$42.35
	Rough Draft	Page	217.00	\$1.50	\$325.50
otes:			Inve	Payment: Credit:	\$1,845.35 \$0.00 \$0.00
			Ba	Interest:	\$1,845.35

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.veritext.com/services/allservices/service-information

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Chicago IL 60694-1303

Invoice #:

CHI2367258

Job#:

2074277

Invoice Date:

7/9/2015

Balance:

\$1,845.35

1 North Franklin Street, Suite 3000 Chicago IL 60606 Tel. 312.442.9087 Fax. 312.442.9095

Fed. Tax ID: 20-3132569



Bill To: Laura Feldman

Equal Employment Opportunity Commission

500 West Madison Street

Suite 2000

Chicago, IL, 60661-2592

Invoice #:

CHI2365485

**Invoice Date:** 

7/7/2015

**Balance Due:** 

\$569.20

Case:

Equal Employment Opportunity Commission v. Costco

Wholesale Corporation

Job#:

2092519 | Job Date: 6/30/2015 | Delivery: Normal

Billing Atty: Laura Feldman

Location:

Seyfarth Shaw LLP

131 S Dearborn St. | Suite 2400 | Chicago, IL 60603-5577

Sched Atty: Sara Eber Fowler | Seyfarth Shaw LLP

Witness	Description	Units	Quantity	Price	Amount
John Carter	Certified Transcript - Medical, Technical & Video	Page	166.00	\$3.25	\$539.50
	Exhibits	Per Page	54.00	\$0.55	\$29.70
Notes: PO#EECC	Notes: PO#EECCHI10102		Invo	ice Total:	\$569.20
				Payment:	\$0.00
				Credit:	\$0.00
				Interest:	
			Bala	ance Due:	\$569.20

TERMS: Payable upon receipt. Accounts 30 days past due will bear a finance charge of 1.5% per month. Accounts unpaid after 90 days agree to pay all collection costs, including reasonable attorney's fees. Contact us to correct payment errors. No adjustments will be made after 90 days. For more information on charges related to our services please consult http://www.ventext.com/services/all-

Please remit payment to: Veritext P.O. Box 71303 Chicago IL 60694-1303

Invoice #:

CHI2365485

Job#:

2092519

**Invoice Date:** 

7/7/2015

Balance:

\$569.20

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20150090 Richard Mrizek **EEOC** 500 West Madison Street Suite 2800

Chicago, IL 60661 Phone: (312) 886-0808

CRIMINAL

MAKE CHECKS PAYABLE TO:-

DATE DELIVERED

06-15-2015

Kathleen M. Fennell, RMR, FCRR

Official Court Reporter 219 South Dearborn Street

Room 2524A Chicago, IL 60604

Phone: (312) 435-5569

Tax ID: 26-1890773 kathyfennell@earthlink.net

DATE ORDERED:

06-11-2015

Case Style: 14 C 6553, EEOC v Costco Wholesale Corp.

X CIVIL

Transcript of proceedings before the Hon. Ruben Castillo of 6-9-15

CATEGORY		DRIGINA	L		1ST CO	PY	2	ND COF	PY	TOTAL
	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	CHARGES
Ordinary		3.65			0.90			0.60		
14-Day		4.25			0.90			0.60		
Expedited	11	4.85	53.35		0.90			0.60		53.35
Daily		6.05			1.20			0.90		
Hourly		7.25			1.20			0.90		
Realtime		3.05			1.20					
Misc. Desc.	**							MISC.	CHARGES:	
								_	TOTAL:	53.35
					L	ESS DISCO	UNT FO	R LATE	DELIVERY:	
								TAX (If	Applicable):	
					500	LES	SS AMO	UNT OF	DEPOSIT:	
	*							TOTAL	L REFUND:	
							-	TO	DTAL DUE:	\$53.35

ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE:

/s/Kathleen M. Fennell

DATE

06-15-2015

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20150090 Richard Mrizek **EEOC** 500 West Madison Street Suite 2800

Chicago, IL 60661 Phone: (312) 886-0808

CRIMINAL

MAKE CHECKS PAYABLE TO:-

DATE DELIVERED

06-15-2015

Kathleen M. Fennell, RMR, FCRR

Official Court Reporter 219 South Dearborn Street

Room 2524A Chicago, IL 60604

Phone: (312) 435-5569

Tax ID: 26-1890773 kathyfennell@earthlink.net

DATE ORDERED:

06-11-2015

Case Style: 14 C 6553, EEOC v Costco Wholesale Corp.

X CIVIL

Transcript of proceedings before the Hon. Ruben Castillo of 6-9-15

CATEGORY		DRIGINA	L		1ST CO	PY	2	ND COF	PY	TOTAL
	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	CHARGES
Ordinary		3.65			0.90			0.60		
14-Day		4.25			0.90			0.60		
Expedited	11	4.85	53.35		0.90			0.60		53.35
Daily		6.05			1.20			0.90		
Hourly		7.25			1.20			0.90		
Realtime		3.05			1.20					
Misc. Desc.	**							MISC.	CHARGES:	
								_	TOTAL:	53.35
					L	ESS DISCO	UNT FO	R LATE	DELIVERY:	
								TAX (If	Applicable):	
					500	LES	SS AMO	UNT OF	DEPOSIT:	
	*							TOTAL	L REFUND:	
							-	TC	DTAL DUE:	\$53.35

ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE:

/s/Kathleen M. Fennell

DATE

06-15-2015

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20160155 MAKE CHECKS PAYABLE TO: -Kathleen M. Fennell, RMR, FCRR Laura Feldman Official Court Reporter **EEOC** 219 S. DEARBORN ST, STE 2524A 500 West Madison Street Chicago, IL 60604 **Suite 2800** Chicago, IL 60661 Phone: (312) 435-5569 Phone: (312) 886-0808 Tax ID: 26-1890773 kathyfennell@earthlink.net DATE DELIVERED: DATE ORDERED: X CIVIL 11-21-2016 CRIMINAL 11-16-2016 Case Style: 14 C 6553, EEOC v Costco Transcript of proceedings before the Hon. Ruben Castillo of 10/28/16 TOTAL 1ST COPY 2ND COPY **ORIGINAL** CHARGES **CATEGORY** PRICE SUBTOTAL PRICE SUBTOTAL **PAGES** PAGES PRICE SUBTOTAL **PAGES** 0.60 0.90 Ordinary 3.65 0.90 0.60 4.25 14-Day 38.80 0.60 38.80 0.90 8 4.85 Expedited 0.90 1.20 6.05 Daily 0.90 Hourly 1.20 7.25 1.20 Realtime 3.05 MISC. CHARGES: Misc. Desc. TOTAL: 38.80 LESS DISCOUNT FOR LATE DELIVERY: TAX (If Applicable): LESS AMOUNT OF DEPOSIT: **TOTAL REFUND:** \$38.80 **TOTAL DUE:** ADDITIONAL INFORMATION Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate. CERTIFICATION I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States. DATE SIGNATURE: /s/Kathleen M. Fennell 11-21-2016

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20160155 MAKE CHECKS PAYABLE TO: -Kathleen M. Fennell, RMR, FCRR Laura Feldman Official Court Reporter **EEOC** 219 S. DEARBORN ST, STE 2524A 500 West Madison Street Chicago, IL 60604 **Suite 2800** Chicago, IL 60661 Phone: (312) 435-5569 Phone: (312) 886-0808 Tax ID: 26-1890773 kathyfennell@earthlink.net DATE DELIVERED: DATE ORDERED: X CIVIL 11-21-2016 CRIMINAL 11-16-2016 Case Style: 14 C 6553, EEOC v Costco Transcript of proceedings before the Hon. Ruben Castillo of 10/28/16 TOTAL 1ST COPY 2ND COPY **ORIGINAL** CHARGES **CATEGORY** PRICE SUBTOTAL PRICE SUBTOTAL **PAGES** PAGES PRICE SUBTOTAL **PAGES** 0.60 0.90 Ordinary 3.65 0.90 0.60 4.25 14-Day 38.80 0.60 38.80 0.90 8 4.85 Expedited 0.90 1.20 6.05 Daily 0.90 Hourly 1.20 7.25 1.20 Realtime 3.05 MISC. CHARGES: Misc. Desc. TOTAL: 38.80 LESS DISCOUNT FOR LATE DELIVERY: TAX (If Applicable): LESS AMOUNT OF DEPOSIT: **TOTAL REFUND:** \$38.80 **TOTAL DUE:** ADDITIONAL INFORMATION Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate. CERTIFICATION I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States. DATE SIGNATURE: /s/Kathleen M. Fennell 11-21-2016

## UNITED STATES DISTRICT COURT

FOR THE NORTHERN DISTRICT OF ILLINOIS

Richard Mrizek

**EEOC** 

500 West Madison Street

Suite 2800

Chicago, IL 60661

Phone: (312) 886-0808

INVOICE NO: 20160110

#### MAKE CHECKS PAYABLE TO:-

Kathleen M. Fennell, RMR, FCRR

Official Court Reporter

219 S. DEARBORN ST, STE 2524A

Chicago, IL 60604

Phone:

(312) 435-5569

Tax ID:

26-1890773 kathyfennell@earthlink.net

CRIMINAL

x CIVIL

DATE ORDERED:

09-07-2016

DATE DELIVERED

09-07-2016

Case Style: 14 CV 6553, EEOC v Costco Wholesale Corp.

Transcript of proceedings before the Hon. Ruben Castillo of 8/3/16.

0.4750000		DRIGINA	L		1ST CO	PΥ	2	ND COP	Υ	TOTAL
CATEGORY	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	CHARGES
Ordinary		3.65			0.90			0.60		_
14-Day		4.25			0.90			0.60		
Expedited		4.85		9	0.90	8.10		0.60		8.10
Daily		6.05			1.20			0.90		
Hourly		7.25			1.20			0.90		
Realtime		3.05			1.20		1			
Misc. Desc.	•			1				MISC	CHARGES:	

TOTAL:

8.10

LESS DISCOUNT FOR LATE DELIVERY:

TAX (If Applicable):

LESS AMOUNT OF DEPOSIT:

TOTAL REFUND:

TOTAL DUE:

\$8.10

#### ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE:

/s/Kathleen M. Fennell

09-07-2016

(All previous editions of this form are cancelled and should be destroyed)

# UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20150116

MAKE CHECKS PAYABLE TO:

dman Kathleen M. Fennell, RMR, FCRR Official Court Reporter West Madison Street 219 South Dearborn Street Suite 2800 Room 2524A Chicago, IL 60661 Chicago, IL 60604 Phone: (312) 886-0808 (312) 435-5569 Phone: 26-1890773 Tax ID: kathyfennell@earthlink.net DATE ORDERED: DATE DELIVERED: X CIVIL CRIMINAL 08-05-2015 08-06-2015 Case Style: 14 C 6553, EEOC v Costco Wholesale Corp. Transcript of proceedings before the Hon. Ruben Castillo of 7-22-15. **ORIGINAL** 1ST COPY 2ND COPY TOTAL CATEGORY **CHARGES** PAGES PRICE SUBTOTAL **PAGES** PRICE SUBTOTAL PAGES PRICE SUBTOTAL Ordinary 3.65 0.90 0.60 14-Day 4.25 0.90 0.60 4 4.85 19.40 0.90 19.40 0.60 Expedited Daily 6.05 1.20 0.90 Hourly 7.25 1.20 0.90 Realtime 3.05 1.20 Misc. Desc. MISC. CHARGES: 19.40 TOTAL: LESS DISCOUNT FOR LATE DELIVERY: TAX (If Applicable): LESS AMOUNT OF DEPOSIT: TOTAL REFUND: **TOTAL DUE:** \$19.40 ADDITIONAL INFORMATION Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate. CERTIFICATION I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States. SIGNATURE: DATE /s/Kathleen M. Fennell 08-06-2015 (All previous editions of this form are cancelled and should be destroyed)

#### UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20150100

## MAKE CHECKS PAYABLE TO:

nard Mrizek **EEOC** 500 West Madison Street Suite 2800

Chicago, IL 60661 Phone: (312) 886-0808 Kathleen M. Fennell, RMR, FCRR Official Court Reporter 219 South Dearborn Street

Room 2524A Chicago, IL 60604

Phone:

(312) 435-5569

Tax ID: 26-1890773 kathyfennell@earthlink.net

DATE DELIVERED DATE ORDERED 06-25-2015 06-25-2015 X CIVIL CRIMINAL

Case Style: 14 C 6553, EEOC v Costco Wholesale Corp.

Transcript of proceedings before the Hon. Ruben Castillo of 6-25-15.

TOTAL	Υ	VD COP	21	Υ	1ST COF		L	RIGINAL		
CHARGES	SUBTOTAL	PRICE	PAGES	SUBTOTAL	PRICE	PAGES	SUBTOTAL	PRICE	PAGES	CATEGORY
		0.60			0.90			3.65		Ordinary
		0.60			0.90			4.25		14-Day
		0.60			0.90			4.85		Expedited
		0.90			1.20			6.05		Daily
19.20		0.90		19.20	1.20	16		7.25		Hourly
					1.20			3.05		Realtime
	CHARGES:	MISC.								Misc. Desc.
19.20	TOTAL:									
	E DELIVERY:	OR LATE	DUNT F	ESS DISC			<u> </u>			
	f Applicable):	TAX (I								
	F DEPOSIT:	OUNT C	ESS AM	L	ı	. 4				
	AL REFUND:	TOT							9	
\$19.20	TOTAL DUE:								-	

#### ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

DATE 06-25-2015 SIGNATURE /s/Kathleen M. Fennell

AO44 Rev. 11/07)	F	UNITE OR THE N	D STA	TES DI	STRICT C	OURT FILLING	OIS		
					0160171			S PAYABL	E TO:
Joyce Barksda EEOC 500 West Mac Suite 2800 Chicago, IL 6 Phone: (312)	dison Street		DATE ORE	DEDED:	Kathleen Official C 219 S. Dl Chicago, Phone:	M. Fenne Court Rep EARBOR	ell, RN porter RN ST 4 3-5569 73 3k.net	AR, FCRR , STE 2524A	×
	1114712	CIVIL			12-20-2016			12-2	1-2016
<b>Case Style: 14</b> Transcript Trial Volu	of procee	v Costco Who dings be	fore t	the Ho	n. Rubei				
	ORIGIN	AL	-	IST COP	Υ		D COP		TOTAL CHARGES
CATEGORY	PAGES PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES F	PRICE	SUBTOTAL	011111000
Ordinary	3.65	5		0.90			0.60		
	4.25	5		0.90			0.60		
14-Day				0.90			0.60		
	4.8	P	1 .					I	124.80
14-Day Expedited Daily	6.0		104	1.20	124.80		0.90		121.00
Expedited		5	104	1.20	124.80		0.90		121.00
Expedited Daily	6.0	5	104		124.80		0.90	2112 5050	121.00
Expedited  Daily  Hourly	6.0 7.2	5	104	1.20	124.80		0.90	CHARGES:	
Expedited  Daily  Hourly  Realtime	6.0 7.2	5	104	1.20			0.90 MISC.	TOTAL:	124.80
Expedited  Daily  Hourly  Realtime	6.0 7.2	5	104	1.20			0.90 MISC.		
Expedited  Daily  Hourly  Realtime	6.0 7.2	5	104	1.20			0.90	TOTAL:	
Expedited  Daily  Hourly  Realtime	6.0 7.2	5	104	1.20	LESS DISC	OUNT FO	0.90  MISC.  R LATI	TOTAL:	
Expedited  Daily  Hourly  Realtime	6.0 7.2	5	104	1.20	LESS DISC	OUNT FO	0.90  MISC.  R LATI  TAX (	TOTAL:  E DELIVERY:  If Applicable):	

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

Judicial Conference	e of the United States.	DATE	42.24.2016
SIGNATURE:	/s/Kathleen M. Fennell		12-21-2016

#### UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20160168 -MAKE CHECKS PAYABLE TO:-Kathleen M. Fennell, RMR, FCRR Joyce Barksdale Official Court Reporter **EEOC** 219 S. DEARBORN ST, STE 2524A 500 West Madison Street Chicago, IL 60604 **Suite 2800** Chicago, IL 60661 Phone: (312) 435-5569 Phone: (312) 886-0808 Tax ID: 26-1890773 kathyfennell@earthlink.net DATE DELIVERED DATE ORDERED: 12-16-2016 X CIVIL 12-15-2016 CRIMINAL Case Style: 14 C 6553, EEOC v Costco Wholesale Corp. Transcript of proceedings before the Hon. Ruben Castillo of 12/15/16. Trial Volume 4 **TOTAL** 2ND COPY **ORIGINAL** 1ST COPY CHARGES **CATEGORY** PRICE SUBTOTAL SUBTOTAL PAGES PRICE **PAGES** PAGES | PRICE SUBTOTAL 0.60 0.90 3.65 Ordinary 0.60 0.90 4.25 14-Day 0.60 0.90 4.85 Expedited 234.00 234.00 0.90 1.20 195 6.05 Daily 0.90 1.20 Hourly 7.25 1.20 Realtime 3.05 MISC. CHARGES: Misc. Desc. TOTAL: 234.00 LESS DISCOUNT FOR LATE DELIVERY: TAX (If Applicable): LESS AMOUNT OF DEPOSIT: TOTAL REFUND: \$234.00 **TOTAL DUE:** ADDITIONAL INFORMATION Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate. CERTIFICATION I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States. DATE SIGNATURE: 12-16-2016 /s/Kathleen M. Fennell

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20160173 MAKE CHECKS PAYABLE TO: Jovce Barksdale Kathleen M. Fennell, RMR, FCRR **EEOC** Official Court Reporter 500 West Madison Street 219 S. DEARBORN ST. STE 2524A **Suite 2800** Chicago, IL 60604 Chicago, IL 60661 Phone: (312) 886-0808 Phone: (312) 435-5569 Tax ID: 26-1890773 kathyfennell@earthlink.net DATE DELIVERED: DATE ORDERED: X CIVIL 12-21-2016 CRIMINAL 12-21-2016 Case Style: 14 C 6553, EEOC v Costco Wholesale Corp. Transcript of proceedings before the Hon. Ruben Castillo of 12/21/16. Trial Volume 8 TOTAL **ORIGINAL** 1ST COPY 2ND COPY CHARGES **CATEGORY** SUBTOTAL **PAGES** PRICE SUBTOTAL PRICE PAGES **PAGES** PRICE SUBTOTAL 0.60 0.90 3.65 Ordinary 0.60 0.90 4.25 14-Day 0.60 0.90 4.85 Expedited 7.20 0.90 7.20 6 1.20 6.05 Daily 0.90 1.20 Hourly 7.25 1.20 3.05 Realtime MISC. CHARGES: Misc. Desc. 7.20 TOTAL: LESS DISCOUNT FOR LATE DELIVERY: TAX (If Applicable): LESS AMOUNT OF DEPOSIT: TOTAL REFUND: \$7.20 TOTAL DUE: ADDITIONAL INFORMATION Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate. **CERTIFICATION** I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

/s/Kathleen M. Fennell

DATE

12-21-2016

SIGNATURE

AO44 (Rev. 11/07)

#### UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20160170

#### -MAKE CHECKS PAYABLE TO:-

Joyce Barksdale **EEOC** 500 West Madison Street Suite 2800

CRIMINAL

Chicago, IL 60661 Phone: (312) 886-0808

(312) 435-5569 Phone:

Official Court Reporter

Kathleen M. Fennell, RMR, FCRR

219 S. DEARBORN ST, STE 2524A

Tax ID: 26-1890773 kathyfennell@earthlink.net

DATE DELIVERED

Chicago, IL 60604

DATE ORDERED 12-19-2016

12-20-2016

X CIVIL Case Style: 14 C 6553, EEOC v Costco Wholesale Corp.

Transcript of proceedings before the Hon. Ruben Castillo of 12/19/16.

Trial Volume 6

							UD 005	W/	TOTAL
C	RIGINA								CHARGES
PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES		SOBIOTAL	
	3.65			0.90			0.60		
	4.25			0.90			0.60		
	4.85			0.90		L	0.60		
	6.05		176	1.20	211.20		0.90		211.20
	7.25			1.20			0.90		
	3.05			1.20					
<del></del>							MISC.	CHARGES:	
								TOTAL:	211.20
					LESS DISC	DUNT F	OR LATI	E DELIVERY:	
							TAX (I	f Applicable):	
					LI	ESS AM	OUNT C	F DEPOSIT:	<u></u>
							TOT	AL REFUND:	
								TOTAL DUE:	\$211.2
		PAGES PRICE  3.65  4.25  4.85  6.05  7.25	3.65 4.25 4.85 6.05	PAGES   PRICE   SUBTOTAL   PAGES   3.65   4.25   4.85   6.05   176   7.25	PAGES         PRICE         SUBTOTAL         PAGES         PRICE           3.65         0.90           4.25         0.90           4.85         0.90           6.05         176         1.20           7.25         1.20           3.05         1.20	PAGES         PRICE         SUBTOTAL         PAGES         PRICE         SUBTOTAL           3.65         0.90         0.90           4.25         0.90         0.90           6.05         176         1.20         211.20           7.25         1.20         1.20           3.05         1.20         1.20	PAGES   PRICE   SUBTOTAL   PAGES   PRICE   SUBTOTAL   PAGES	PAGES   PRICE   SUBTOTAL   PAGES   PRICE   SUBTOTAL   PAGES   PRICE	PAGES         PRICE         SUBTOTAL         PAGES         PRICE         SUBTOTAL         PAGES         PRICE         SUBTOTAL           3.65         0.90         0.90         0.60         0.60           4.25         0.90         0.90         0.60           4.85         0.90         0.90         0.60           6.05         176         1.20         211.20         0.90           7.25         1.20         0.90         0.90           3.05         1.20         0.90         0.90    MISC. CHARGES:

#### ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an order for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE

/s/Kathleen M. Fennell

12-20-2016

(All previous editions of this form are cancelled and should be destroyed)

# UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

Joyce Barksdale EEOC 500 West Madison Street Suite 2800 Chicago, IL 60661

Phone: (312) 886-0808

INVOICE NO: 20160167

MAKE CHECKS PAYABLE TO:

Kathleen M. Fennell, RMR, FCRR Official Court Reporter 219 S. DEARBORN ST, STE 2524A Chicago, IL 60604

Phone:

(312) 435-5569

Tax ID: 26-1890773 kathyfennell@earthlink.net

☐ CRIMINAL X CIVIL 12-14-2016 12-15-2016	CRIMINAL X CIVIL	DATE ONDERED.	DATE DELIVERED: 12-15-2016
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Case Style: 14 C 6553, EEOC v Costco Wholesale Corp.

Transcript of proceedings before the Hon. Ruben Castillo of 12/14/16.

Trial Volume 3

		RIGINA	L		1ST CO	PY	2	ND COF	PΥ	TOTAL
CATEGORY	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	CHARGES
Ordinary		3.65			0.90		<u></u>	0.60		
14-Day		4.25			0.90			0.60		·
Expedited		4.85			0.90			0.60		
Daily		6.05		260	1.20	312.00		0.90		312.00
Hourly		7.25			1.20			0.90		
Realtime		3.05			1.20					
Misc. Desc.	-		1	•				MISC.	CHARGES:	
									TOTAL:	312.00
·						LESS DISCO	OUNT FO	OR LATE	DELIVERY:	
								TAX (I	f Applicable):	
					4.	LE	ESS AM	OUNT O	F DEPOSIT:	
	ž*							TOTA	AL REFUND:	
								-	TOTAL DUE:	\$312.00

#### ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE:

/s/Kathleen M. Fennell

DATE

12-15-2016

(Rev. 11/07)

#### UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

INVOICE NO: 20160165

#### MAKE CHECKS PAYABLE TO:-

Joyce Barksdale **EEOC** 

500 West Madison Street

**Suite 2800** 

Chicago, IL 60661

Phone: (312) 886-0808

Kathleen M. Fennell, RMR, FCRR Official Court Reporter 219 S. DEARBORN ST, STE 2524A Chicago, IL 60604

Phone:

(312) 435-5569

Tax ID: 26-1890773 kathyfennell@earthlink.net

DATE ORDERED: DATE DELIVERED: CRIMINAL X CIVIL 12-12-2016 12-13-2016

Case Style: 14 CV 6553, EEOC v Costco Wholesale Corp.

Transcript of proceedings before the Hon. Ruben Castillo of 12/12/16.

Trial Volume 1

		DRIGINA	L		1ST CO	PY	2	ND COF	ov	TOTAL
CATEGORY	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	CHARGES
Ordinary		3.65			0.90			0.60		
14-Day		4.25			0.90			0.60		
Expedited		4.85			0.90			0.60		
Daily		6.05		79	1.20	94.80		0.90		94.80
Hourly		7.25			1.20			0.90		
Realtime		3.05			1.20					
Misc. Desc.								MISC.	CHARGES:	
									TOTAL:	94.80
					L	ESS DISCO	UNT FC	R LATE	DELIVERY:	
							·	TAX (If	Applicable):	
	18					LE	SS AMC	UNT OF	DEPOSIT:	
								TOTA	L REFUND:	
								T	OTAL DUE:	\$94.80

#### ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### **CERTIFICATION**

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE:

/s/Kathleen M. Fennell

DATE

12-13-2016

AO44 (Pay 11/07)		1.18117	TED OT	ATEO	NOTOLOT	COLID			
(Rev. 11/07)		FOR THE			DISTRICT DISTRICT (				
			INVO	ICE NO:	20160166	BA A IZE	OUEO	KS PAYA	
Joyce Barkso EEOC 500 West M Suite 2800 Chicago, IL Phone: (312)	adison Stree 60661 ) 886-0808		DATEO	DDEDED!	Kathleei Official	n M. Fe Court F DEARB , IL 606 (312)	ennell, R Reporter ORN S 604 435-5569 0773 hlink.net	MR, FCRR Γ, STE 2524	1
☐ CRI	MINAL	X CIVIL	DATE O	RDERED:	12-13-2016		DATE	DELIVERED: 12	-14-2016
Transcript Trial Volu	_	eedings be	efore	the Ho	on. Rube	n Cas	tillo	of 12/1	3/16.
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CATEGORY	ORIG	1		1ST COF			ND COP		TOTAL CHARGES
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	PAGES PRIG	CE SUBTOTAL		PRICE			PRICE		
Ordinary	PAGES PRIO	.65		PRICE 0.90			PRICE 0.60		
Ordinary 14-Day	PAGES PRIC	.65 .25		0.90 0.90			0.60 0.60		
Ordinary  14-Day  Expedited	PAGES PRIO	.65 .25	PAGES	0.90 0.90 0.90	SUBTOTAL		0.60 0.60 0.60		CHARGES
Ordinary  14-Day  Expedited  Daily	PAGES PRIO 3 4 4 6 6 7	.65 .25 .85	PAGES	0.90 0.90 0.90 1.20	SUBTOTAL		0.60 0.60 0.60 0.90		CHARGES
Ordinary  14-Day  Expedited  Daily  Hourly	PAGES PRIO 3 4 4 6 6 7	.65 .25 .850525	PAGES	0.90 0.90 0.90 1.20	SUBTOTAL		0.60 0.60 0.60 0.90		CHARGES
Ordinary  14-Day  Expedited  Daily  Hourly  Realtime	PAGES PRIO 3 4 4 6 6 7	.65 .25 .850525	PAGES	0.90 0.90 0.90 1.20	SUBTOTAL		0.60 0.60 0.60 0.90	SUBTOTAL	CHARGES
Ordinary  14-Day  Expedited  Daily  Hourly  Realtime	PAGES PRIO 3 4 4 6 6 7	.65 .25 .850525	PAGES	0.90 0.90 0.90 1.20 1.20	SUBTOTAL	PAGES	0.60 0.60 0.60 0.90 0.90 MISC.	SUBTOTAL  CHARGES: TOTAL:	279.60
Ordinary  14-Day  Expedited  Daily  Hourly  Realtime	PAGES PRIO 3 4 4 6 6 7	.65 .25 .850525	PAGES	0.90 0.90 0.90 1.20 1.20	279.60	PAGES	0.60 0.60 0.60 0.90 0.90 MISC.	SUBTOTAL  CHARGES: TOTAL:	279.60
Ordinary  14-Day  Expedited  Daily  Hourly  Realtime	PAGES PRIO 3 4 4 6 6 7	.65 .25 .850525	PAGES	0.90 0.90 0.90 1.20 1.20	279.60	PAGES	0.60 0.60 0.60 0.90 0.90 MISC.	CHARGES: TOTAL: DELIVERY:	279.60
Ordinary  14-Day  Expedited  Daily  Hourly  Realtime	PAGES PRIO 3 4 4 6 6 7	.65 .25 .850525	PAGES	0.90 0.90 0.90 1.20 1.20	279.60	PAGES	0.60 0.60 0.90 0.90 MISC.  TAX (If	CHARGES: TOTAL: DELIVERY: Applicable):	279.60

ADDITIONAL INFORMATION

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the Judicial Conference of the United States.

SIGNATURE: DATE /s/Kathleen M. Fennell 12-14-2016

						39				
AO44 (Rev. 11/07)		F				DISTRICT (				
				INVOI	CE NO:	20160157		·		
Laura Feldm EEOC 500 West Ma Suite 2800 Chicago, IL Phone: (312)	adison S 60661					Kathleer Official	n M. Fe Court F DEARB , IL 606 (312)	nnell, R Reporter ORN S7 504 435-5569 0773 hlink.net	KS PAYAE MR, FCRR Γ, STE 2524	
CRII	MINAL	X	CIVIL	DATE OF	RDERED:	12-02-2016		DATE		-02-2016
	· C	ORIGINA	L		1ST COF	Pγ	2	ND COP	Υ	TOTAL
CATEGORY	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	PAGES	PRICE	SUBTOTAL	CHARGES
Ordinary		3.65			0.90			0.60		
14-Day		4.25			0.90			0.60		
Expedited		4.85			0.90			0.60		
Daily		6.05		89	1.20	106.80		0.90		106.80
Hourly		7.25			1.20	-		0.90		
Realtime		3.05			1.20					
Misc. Desc.	-							MISC.	CHARGES:	
									TOTAL:	106.80
					L	ESS DISCO	UNT FO	OR LATE	DELIVERY:	
								TAX (If	Applicable):	
						LE	SS AMO	OUNT O	DEPOSIT:	

ADDITIONAL INFORMATION

**TOTAL REFUND:** 

**TOTAL DUE:** 

\$106.80

Full price may be charged only if the transcript is delivered within the required time frame. For example, if an orde for expedited transcript is not completed and delivered within seven (7) calendar days, payment would be at the ordinary delivery rate.

#### CERTIFICATION

I certify that the transcript fees charged and page format used comply with the requirements of this court and the

Judiciai Comeren	ice of the Officer States.	
SIGNATURE	/s/Kathleen M. Fennell	12-02-2016

# COURT REPORTERS, INC. (312) 421-3377

Laura R. Feldman Equal Employment Opportunity Commission (EEOC) Interior Business Center **EEOC Invoice Processing Team** 7301 W Mansfield Ave, Mail Stop D 2770 Denver CO 80235

## INVOICE

Invoice No.	Invoice Date	Job No.
17885	9/1/2016	9616
Job Date	Case	No.
8/17/2016	14 C 6553	
	Case Name	
EOC v. Costco		
	Payment Terms	<del></del>
Due upon recelpt	r dyment remis	

Liza Gold

Hourly

Original 3-5 Day Expedite

Exhibits - scanned (B & W)

Shipping & Handling

Electronic Transcripts (ASCII/ETRAN/MINI/PDF) - Complimentary

Reference No.

: EECFPCHII6I03456

Thank you for using Thompson Court Reporters, Inc.

Checkout our new website @ thompsonreporters.com

8.50 Hours 361.25 @ 42.50 359.00 Pages @ 4.35 1,561.65 230.00 Pages 0.30 69.00 1.00 @ 7.00 7.00 1.00 0.00 0.00

TOTAL DUE >>>

\$1,998.90

Tax ID: 36-4546623

Phone: 312-869-8000 Fax:312-869-8124

Please detach bottom portion and return with payment.

Laura R. Feldman Equal Employment Opportunity Commission (EEOC) Interior Business Center EEOC Invoice Processing Team 7301 W Mansfield Ave, Mail Stop D 2770 Denver CO 80235

Invoice No.

17885

Invoice Date

9/1/2016

**Total Due** 

\$1,998.90

Remit To:

Thompson Court Reporters, Inc.

1017 W. Washington Blvd.

Suite 2F

Chicago IL 60607

Job No.

9616

BU ID

Chicago

Case No.

14 C 6553

Case Name

: EEOC v. Costco



For Professional Services of: Liza H. Gold MD License #

Please make checks payable to: Liza H. Gold, MD

\*Julianne Bowman EEOC C/O Joyce Barksdale Joyce.Barksdale@Eeoc.Gov EECFPCHI16103221

Date: 08/18/16

Billing period: 8/1/16 to 8/18/16

DSM IV:		Previous Balance:	\$0.00	
Date C	PT Description	Fee Payment	Balance	
8/17/16 213	Depostition Testimony 7 hrs.	\$4,200.00	\$4,200.00	

## **INVOICE** Reference # EECFPCHI16103221

New Balance

\$4,200.00

Re: EEOC v Costco EECFPCHII6103221

Over 90 Days

.....\$0.00 61-90 Days

.....\$0.00

31-60 Days

.....\$0.00 0-30 Days .....\$4,200.00



226 South Wabash Avenue Suite 200 Chicago, Illinois 60604

T	•
In	voice

Attention	Date	Invoice #
Laura Feldman	12/2/2016	76384

Bill To

IBC Vendor Payments Attention: EEOC Invoice Processing Team 7301 W. Mansfield Avenue Mail Stop D 2770 Denver CO 80235

Please check box if address is incorrect or has changed, and indicate change(s)

**Balance Due** 

\$348.60

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

P.O. No.	Client I	Matter	Term	s Due Date	Rep
EECFPCHI16103457	EEOC v.	Costco	Net 10	12/12/2016	WMG
Description		Qty	Rate	Service Date	Amount
1" Three Ring Binder - Print reque		1	5.00	11/22/2016	5.00
2" Three Ring Binder - Print reque		1	8.00	11/22/2016	8.00
Blowbacks (B&W) - 8½ x11- Prin (11/22/2016)	-	536	0.10	11/22/2016	53.60
Regular Tabs - Print request (11/2)	2/2016)	68		11/22/2016	17.00
Regular Tabs - Additional Print re (11/29/2016)		198		11/29/2016	49.50
1.5" Three Ring Binder - Addition (11/29/2016)	.	5	6.00	11/29/2016	30.00
Blowbacks (B&W) - 8½ x11- Add request (11/29/2016)	itional Print	1,855	0.10	11/29/2016	185.50
00001183					
	ĺ				
=					
Customer Signature:			Total	290	62.49.60
		i	rotal		\$348.60
For questions about your bill pleas	se call 312.939.3000.	Our Federal	Payments/Credits		\$0.00
Tax ID number is 56-2355533			Balance Due		\$348.60



226 South Wabash Avenue Suite 200 Chicago, Illinois 60604

## Invoice

Attention	Date	Invoice #
LaTricia Phillips	8/12/2016	75818

Bill To

IBC Vendor Payments

Attention: EEOC Invoice Processing Team

7301 W. Mansfield Avenue

Mail Stop D 2770 Denver CO 80235

	Please check below.	oox if	address i	s incorrect	or has	changed,	and	indicate	change(	S
$\Box$	below.								*	

Balance Due \$120.70

PLEASE DETACH PAD RETURN TOP PORTE N WHITEYOUR PAYMENT.

P.O. No.	Client Matter	Terms	Due Date	Rep
EECFPCHI16103457	EEOC v. Costco	Net 10	8/22/2016	WMG

Description	Qty	Rate	Service Date	Amount
Media Deliverable: Hightail/BlueStar FTP	1	15.00	8/10/2016	15.00
OCR	302		8/10/2016	6.04
B&W Scan - Glasswork	302 302		8/10/2016 8/10/2016	75.50 24.10
Blowbacks (B&W) - 8½ x11	302	0.00	8/10/2010	24.10
00000803				
			W. F. S. S.	
			All Lines	
	Carlotte III			
			de la Jacob	
			100 0	
			1 7 1 1	
			F. 13 " "	
			No. of the second	
Customer Signature:		Total		\$120.70
				<b>\$120.70</b>
For questions about your bill please call 312.939.3	1000 Our Federal	Payments/Credits		\$0.00
Tax ID number is 56-2355533	out. Our rederal	Balance Due		\$120.70



226 South Wabash Avenue Suite 200 Chicago, Illinois 60604

## Invoice

Attention	Date	Invoice #
Laura Feldman	10/27/2016	76196

Bill To

Denver CO 80235

IBC Vendor Payments Attention: EEOC Invoice Processing Team 7301 W. Mansfield Avenue Mail Stop D 2770

Please check box if address is incorrect or has changed, and indicate change(s)

**Balance Due** 

\$757.20

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

P.O. No.	Client M	latter	Term	S Due Date	Rep
EECFPCHI16103457	EEOC v. (	Costco	Net 10	11/6/2016	WMG
Description		Qty	Rate	Service Date	Amount
Blowbacks (B&W) - 81/2 x11		2,824	0.10	10/26/2016	282.40
Regular Tabs		344		10/26/2016	86.00
" Three Ring Binder		8		10/26/2016	80.00
" Three Ring Binder		7		10/26/2016	35.00
Blowbacks (B&W) - 8½ x11: Addition Request	al Print	588		10/26/2016	58.80
Technical Time: Creating Plaintiff's ex slipsheets, covers & spine, assemble an three ring binder.		2	75.00	10/26/2016	150.00
Media Deliverable: Hightail/BlueStar I	FTP	1	15.00	10/26/2016	15.00
Delivery to Judge Castillo, 219 S. Dea Erin Foley, Seyfarth Shaw		2	25.00	10/26/2016	50.00
00001060					
	Y Kar				
		37			
Customer Signature:	717		Total		\$757.20
E 121 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 212 020 2000		Payments/Credits		\$0.00
For questions about your bill please of Tax ID number is 56-2355533	111 312.939.3000.	Our rederai	Balance Due		\$757.20



226 South Wabash Avenue Suite 200 Chicago, Illinois 60604

## **Invoice**

Attention	Date	Invoice #
Laura Feldman	1/13/2017	76543

Bill To

**IBC Vendor Payments** 

Attention: EEOC Invoice Processing Team

7301 W. Mansfield Avenue

Mail Stop D 2770 Denver CO 80235

Please check box if address is incorrect or has changed, and indicate change(s)

<b>Balance Due</b>	\$554.90
--------------------	----------

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

P.O. No.	Client Matter	Terms	Due Date	Rep
	See Below	Net 10	1/23/2017	WMG

Description	Qty	Rate	Service Date	Amount
Client Matter: EEOC v. Costco / PO #				
EECFPCHI16103457				
1" Three Ring Binder- Print Request (12/8/16)	1	5.00	12/9/2016	5.00
1.5" Three Ring Binder- Print Request (12/8/16)	1		12/9/2016	6.00
1.5" Three Ring Binder- Additional Print Request	2		12/9/2016	12.00
(12/9/16)	2	0.00	12/9/2010	12.00
1.5" Three Ring Binder- Additional Print Request	10	6.00	12/19/2016	60.00
(12/16/16)				
Blowbacks (B&W) - 8½ x11- Print Request	412	0.10	12/9/2016	41.20
(12/8/16)				
Blowbacks (B&W) - 8½ x11- Additional Print	412	0.10	12/9/2016	41.20
Request (12/9/16)				
Blowbacks (B&W) - 8½ x11- Additional Print	2,430	0.10	12/19/2016	243.00
Request (12/16/16)				
Regular Tabs- Print Request (12/8/16)	350	0.25		87.50
Regular Tabs- Additional Print Request (12/9/16)	68	0.25		17.00
Regular Tabs- Additional Print Request (12/16/16)	68		12/19/2016	17.00
Delivery Fee- 10 copies to Judge Castillo	1	25.00	12/19/2016	25.00
00001250				
00001230				
Customer Signature:		Total		\$554.90
		Payments/Credits		\$0.00
For questions about your bill please call 312.939.3000. Our Federal Tax ID number is 56-2355533		<b>Balance Due</b>		\$554.90

## CLAIMS FOR WITNESS ATTENDANCE FEES, TRAVEL, AND MISCELLANEOUS EXPENSES

PART I - ATTENDANCE CERTIFICATION					
1. General information a. Witness Name b. Witness Address Street City c. US Citized Yes Travel and Attendance information a. Dates of Travel from Residence to Case Location: b. Dates of Travel from Case Location to Residence: c. Dates of Attendance:  1. Certify that the witness named above attended in the case of Defore the United States Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called, the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where more than four witnesses were called the Magistrate Where Wher	Case Name  Case Number  District or Location    Langer				
(Signature)	(Title) (Date)				
PART II - WITNE	SS CLAIM FOR FEES AND ALLOWANCES				
Attendance Fees     Fact, Pretrial Conference & Detained Witness     Total Attendance Fees	Rate No. of Days Amount Claimed Totals  S S				
Mileage Allowance (Indicate type of privately owned vehicle:         (auto) (motorcycle) (sirplane)         From Residence to Case Location (and Return)         From Hotel/Motel to Court (or Court to Hotel/Motel)         Total MReage Allowance	Rate No. of Ailles Amount Claimed  S  S  S				
3. Subsistence Per Diem Rate: or HRGA Rate: a. Meals b. Lodging Total Subsistence Allowance	74 6 s 407.00 s 407.00				
4. Miscellaneous Allowances (See Item 8 Below) a. Common Carrier b. Parking Fees, Tollé, Taxi Fares Total Miscellaneous Allowances  5. Total Amount Claimed (Items 1-4, Part #) 6. Less Outstanding Check or Cash Advances 7. Net Amount Claimed by Witness 8. Use this space to Itemize your expenses from Item 4, Part II above. Receipts are requidisingle Items in excess of \$15.00.	Amount Claimed  Samount				
an angle teams in cocces of states.	784 B				
	Faid by Cash \$				
	(Signature of Payee)				
	(0.1-1)				
W	(Date)				
9. I certify that the above data is correct and that payment has not been rece (was not) a citizen of the tinited States. (If not a citizen, present your Allen Registration travel.	Witness Certification lived, and that at the time of travel and attendance I (was) (was not) a U.S. Government employee and I (was) Record with this form.) I (oid) (did not) schele a Government transportation Request to pay for my official				
	X 12/30/2016				
(Lignature)	(Date)				
AAWP III	BEEEBVEN END EINANCE GEBICE				
PARI III -	RESERVED FOR FINANCE OFFICE				
Computation     a. Vet Amount Claimed by Witness (From Item 7, Part II)     Adjustments Due to Any Differences (Explain Differences)	\$				
c. Amount Authorized for Payment	<u> </u>				
d. ByTitle	Date				
2. Accounting Classification Data					



## Your Itinerary

#### Trip on Dec 11, 2016

Locator: OEFQMV

Date: Dec 08, 2016

Traveler

**MARTIN SUPPO** 

**EEOC** 

THIS IS YOUR OFFICIAL RECEIPT FOR TRAVEL

PLEASE RETAIN FOR VOUCHERING OR

REIMBURSEMENT PURPOSES.

Customer Number

361MX3M

Agent

EΑ

\*\*\*\*\*\*\*\*\*

TA RCVD FR JOYCE BARKSDALE-BY R PICASSO

FEES TOTALING 33.07PP CHARGED IN ADDITION TO TKT PRICE

FEE-USD33.07PP-AIR DOMESTIC, TRADITIONAL

#### Sunday, December 11, 2016

Confirmation OEFQMV



#### Flight AMERICAN AIRLINES 374

**DEPARTURE** 

FT LAUDERDALE, FL 9:50 AM, Dec 11, 2016 ARRIVAL

CHICAGO/OHARE 12:07 PM, Dec 11, 2016

Status Class Duration

Coach Class - Y 03:17 (Non-stop) Boeing 737-800 Food For Purchase

Meal Service Frequent Flyer

Equipment

AARJ70692

Confirmed

Notes

**DEP-TERMINAL 3 ARR-TERMINAL 3 ONEWORLD** 

#### Wednesday, December 21, 2016

Confirmation OEFQMV



#### Flight AMERICAN AIRLINES 1234

**DEPARTURE** CHICAGO/OHARE 6:30 PM, Dec 21, 2016

**ARRIVAL** 

FT LAUDERDALE, FL 10:36 PM, Dec 21, 2016

Status Class Duration Confirmed Coach Class - Y 03:06 (Non-stop) Boeing 737-800

Equipment Meal Service Reserved Seats

Food For Purchase

Frequent Flyer

17C (Aisle) AARJ70692

Notes

**DEP-TERMINAL 3** ARR-TERMINAL 3 **ONEWORLD** 

<u>Name</u>
-------------

Invoice / Ticket / Date

Base <u>Tax 1</u>

Tax 2

<u>Tax 3</u>

<u>Total</u>

SUPPO M

243292/000SFCTRF/08DEC16

33.07

39.90US

8.00ZP

**Total Amount** 

SUPPO MARTIN

243292/0017929601517/08DEC16

USD 532.10

20.20XT

33.07 600.20

633.27

Form of Payment: VIXXXXXXXXXXXX3675

Trip on Dec 16, 2016

Locator: OEFQMV

Date: Dec 15, 2016

Traveler

**MARTIN SUPPO** 

**EEOC** 

THIS IS YOUR OFFICIAL RECEIPT FOR TRAVEL

PLEASE RETAIN FOR VOUCHERING OR

REIMBURSEMENT PURPOSES.

Customer Number

361MX3M

Agent

EΑ

TA RCVD FR JOYCE BARKSDALE-BY R PICASSO

\*\*\*\*\*\*\*\*\*

FEES TOTALING 33.07PP CHARGED IN ADDITION TO TKT PRICE

FEE-USD33.07PP-AIR AGENT INITIATED DOMESTIC

\*\*\*\*\*\*\*\*EXCHANGE TICKET INFORMATION\*\*\*\*\*\*\*\*\*\*\*\*

EXCHANGED TKT 0017929601517 OLD TKT VALUE 600.20

NEW TICKET 0017931036267 TOTAL VALUE 600.20

AIRLINE PENALTY/REISSUE FEE......0.00

ADDITIONAL AMOUNT CHARGED.......0.00

REFUND BACK TO ORIGINAL FOP.....-0.00 RESIDUAL NONREFUNDABLE MCO......0.00

\*\*\*\*\*\*\*\*\*\*\*\*\*\*

#### Friday, December 16, 2016

Confirmation **OEFQMV** 



#### Flight AMERICAN AIRLINES 1433

**DEPARTURE** CHICAGO/OHARE 11:50 AM, Dec 16, 2016 **ARRIVAL** FT LAUDERDALE, FL 3:52 PM, Dec 16, 2016

Status

Confirmed

Class Duration Coach Class - Y 03:02 (Non-stop)

Equipment

Boeing 737-800

Meal Service

Food For Purchase

Reserved Seats

7F (Window)

Frequent Flyer

AARJ70692

Notes

**DEP-TERMINAL 3** 

**ARR-TERMINAL 3** 

**ONEWORLD** 

Name

Invoice / Ticket / Date

Tax 1 Base

Tax 2

Tax 3

<u>Total</u> 0.00

SUPPO MARTIN

245196/0017931036267/15DEC16

33.07

33.07

SUPPO M

245196/000SFCTRF/15DEC16

**Total Amount** 

33.07

Form of Payment: VIXXXXXXXXXXXXX3675

#### **GENERAL INFORMATION**

THANK YOU FOR BOOKING WITH CWTSATOTRAVEL PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT CWTSATOTRAVEL PHONE RESERVATION 866-654-5522 HOURS OF BUSINESS ARE MON-FRI 7AM-10PM EASTERN FOR AN AFTER HOURS EMERGENCY, PLEASE CONTACT CWTSATOTRAVEL AT 866-654-5522

\*\*\*\*IF INTERNATIONAL 800 NUMBER DOES NOT WORK PLEASE\*\*\*

GLOBE TAXI CREDIT RECEIPT DRIVER: 00102050 CAB #: 6802 → DATE : 12/11/16 TIME:16:43-16:49 RATE #: \_ 1 STANDARD RATE MILES R1: 1.00 TRIP# : 2527 FARE : \$6.25 EXTRAS: \$1.00 TECH. FEE: \$0,50 TIPS : \$4.00 TOTAL : \$11.75 \$4.00 VISA \*\*\*6689 AUTHOR.: 034251 MID: 00720000261084 ENTRY METHOD: CONTACT CHIP AID: A000000031010 APPL. NAME: CHASE VISA ATC : 000C AC: 3DBE9FCABECEF3D0 REC/INV#: 2527 TID: 327515647

CALL 311 FOR

COMPLIMENTS OR

COMPLAINTS.

Tà EFAC

ORIGINAL --YELLOW CAB CAB # 1601 CUSTOMER COPY - 12/11/16 TR 1918 START END MILES 13:12 13:16 0.0 FARE: \$ 5.00 EXTRA: \$ 1.00 TOLL: \$ 0.00 SRCH: \$ 0.00 TIP: \$ 4.00 FEE: \$ 0.50 TOTAL: \$ 10.50

> CARD: 6689 AUTH: 01398I

CALL 311 FOR COMPLIMENTS OR COMPLAINTS

--ORIGINAL--

110: PZ0000. DR. ID: 10087233 CAB#: DATE: 12/11/2016 ST. TIME: 12:28 END TIME: 12:51 PASS#: TRIP#: DIST.: 16,80 MI RATE 1 \$ 41.00 FARE: EXTRA: \$ 4.00 \$ 8,00 TIP: SUBTOTAL: \$ 53.00 TECH. FEE:\$ 0,50 TOTAL: \$ 53,50 CARD#: \*\*\*\*6689 AUTH#: 033541 ENTRY METHOD: CUNTACT CHIP AID: A0000000031010 APPL. NAME: CHASE VISA ATC: 000B AC: F3451B6D946::C351

ACTION OF

1 100-

CARDHOLDER
ACKNOWLEDGES
RECEIPT OF FUNDS
IN THE AMOUNT OF
THE TOTAL
INDICATED AND
AGREES TO
PERFORM THE
OBLIGATIONS
NOTED IN THE
CARDHOLDER'S
AGREEMENT WITH
THE ISSUER

CALL 311
FOR COMPLIMENTS
OR COMPLAINTS

ARTOPA

## to Count

CITY SERVICE TX. -CREDIT RECEIPT-PASSENGER COPY HACK#: 00079062 1081 CAB#: DATE: 12/13/2016 ST.TIME: 11:54 END TIME: 12:02 TRIP#: 17610 DIST: 1.20 MI FARE: \$ 6.75 EXTRA: \$ 0.00 TECH FEE:\$ 0.50 TIP : \$ 3.00 GR. TOT: \$ 10, 25 VISA \*\*\*\*6689 AUTH#: 092591 . CALL 311 . FOR COMPLIMENTS OR COMPLAINTS

70, E

--ORIGINAL--Blue Ribbon Taxi Cab # 6103 CUSTOMER COPY 12/13/16 TR 2782 START END MILES 17:05 17:18 0.1 Fare: \$ 8.50 Extra: \$ 1.00 Toll: \$ 0.00 Srch: \$ 0.00 Tip: 4.00 Fee: 0.50 TOTAL: \$ 14.00

Card: 6689 AUTH: 05343I

CALL 311 FOR COMPLIMENTS OR COMPLAINTS

#### COART TO 1/2/22

--ORIGINAL--BLUE RIBBON TAXI CAB # 2440 CUSTOMER COPY 12/14/16 TR 1346 START END MILES 17:11 17:27 0.0 --ORIGINAL--BLUE RIBBON TAXI CAB # 2440 CUSTOMER COPY 12/14/16 TR 1346 START END MILES 17:11 17:27 0.0 FARE: \$ 10.25 1.00 EXTRA: \$ TOLL: \$
SRCH: \$
TIP: \$
FEE: \$ 0.00 0.00 3.00 0,50 TOTAL: \$. 14.75

> CARD: 6689 AUTH: 04709I

CALL 311 FOR COMPLIMENTS OR COMPLAINTS

--ORIGINAL--

GLOBE TAXI

To Cour? CREDIT RECEIPT DRIVER: 00101364 CAB #: 5371 DATE : 12/14/16 TIME:11:52-11:59 RATE #: 1 STANDARD RATE MILES R1: 1.20 TRIP# : 860 FARE : \$7.00 TECH. FEE: \$0.50 TIPS : \$3.00 TOTAL: \$10.50 VISA \*\*\*6689 AUTHOR.: 010391 MID :\*\*\*\*+084 CONTACT CHIP AID: A000000031010 APPL. NAME: CHASE VISA ATC : 0010 8365487A82794D80 REC/INV#: 660 TID: \*\*\*\*\*\*703

CALL 311 FOR COMPLIMENTS OR COMPLAINTS.

#### Antone

ROYAL 3 CCC 312-791-1272 \*\*\*\*CREDIT CARD SALE\*\*\*\* ENTRY METHOD: CONTACT CHIP AID: A0000000031010 APPLication ID: CHASE VISA 0013 274413E70D56210C ATC: AC: TERMINAL 00L260675045 \*\*\* DRIVER 65609 CAB 4246 PASSENGERS 12/16/16 09:36 DATE 09:09:06 START END TRIP 09:30:07 356 STANDARD RATE 1 17.69 mi DISTANCE FARE R1 \$43.00 EXTRA \$0.00 TOLL \$0.00 SUB TOTAL \$43.00 TIP \$10.88 TECHNOLOGY FEE: 10.50 TOTAL \$54.38 \*\*\*\*\*\*\*\*\*\* SALE AUTH 090481 SIGN X: \_\_

CARDHOLDER ACKNOWLEDGES RECEIPT OF FUNDS IN THE AMOUNT OF THE TOTAL INDI CATED AND AGREES TO PERF ORM THE OBLIGATIONS NOTE D IN THE CARDHOLDERS AGR EEMENT WITH THE ISSUER

\*\*\*\*\*\*DRIUER COPY\*\*\*\*\* CALL 311 FOR COMPLIMENTS OR COMPLAINTS.

CHICAGO CARRIAGE CAB 312-326-2221 \*\*\*\*CREDIT CARD SALE\*\*\*\* ENTRY METHOD: CONTACT CHIP AID: A0000000031010 APPlication ID: CHASE VISA ATC: 0012 7549046B2411842A AC: TERMINAL 00L260390324 DRIVER 54550 CAB 6686 PASSENGERS DATE 12/15/2016 11:03 START 10:46:41 10:46:41 END 10:58:23 TRIP 508 STANDARD RATE 1 DISTANCE 1.24 ml FARE R1 \$8.00 \$1.00 j EXTRA TOLL \$0.00 SUB TOTAL \$9.00 TIP \$4.00 TECHNOLOGY FEE: \$0.50 TOTAL \$13.50 SALE \*\*\*\*\*\*\*\*\*\* AUTH 004671 \*\*\*\*\*\*DRIVER COPY\*\*\*\*\*\* CALL 311 FOR COMPLIMENTS

OR COMPLAINTS.

--ORIGINAL--CHOICE TAXI CAB # 0290 CUSTOMER CUPY - 12/15/16 TR 5484 START END MILES Ø 08:36 08:47 1.2 FARE: \$ EXTRA: \$ 1.00 TOLL: \$ SRCH: \$ 0.00 TIP: \$
FEE: \$ 4.00 0.50 TOTAL: \$ 13.25

10 3 30

CARD: 6689 AUTH: 026061

CALL 311 FOR COMPLIMENTS OR COMPLAINTS



12-16-16

Martin Suppo 500 W Madison St Ste 2000 Chicago IL 60661-2592 **United States** 

Folio No. A/R Number Group Code

Cashier No. : 105

Room No. : Arrival

1522 : 12-11-16

Company Membership No. : PC

Invoice No.

685025903

Departure : 12-16-16 Conf. No. : 66065285 Rate Code: IYOTH

Date	Description		
2-11-16 *Accommodation	Description	Charges	Credits
2-11-16 State Tax		117.00	
2-11-16 City Tax		13.92	
2-11-16 County Tax		5.27	
-12-16 Visa XXX	XXXXXXXXXX2233	1.17	
Accommodation			137.36
12-16 State Tax		135.00	
12-16 City Tax		16.07	
12-16 County Tax		6.08	
13-16 Visa XXX	XXXXXXXX <sub>2233</sub>	1.35	
Accommodation	3 3 12200		158.50
3-16 State Tax		135.00	
3-16 City Tax		16.07	
3-16 County Tax		6.08	
*Accommodation		1.35	
-16 State Tax		135.00	
-16 City Tax		16.07	
-16 County Tax		6.08	
*Accommodation	14	1.35	
16 State Tax		117.00	
16 City Tax		13.92	
16 County Tax		5.27	
6 Visa XXXXXX	XXXXXX2233	1.17	
			454.36

Crowne Plaza Chicago Metro Downtown 733 West Madison Street Chicago, Illinois 60661 Tel:(312)829-5000 Fax:(312)602-2199



12-29-16

Folio No. : 603620 Room No. : 1523 Joyce Barksdale Cashier No. : 75 500 W Madison St Ste 2000 A/R Number Arrival : 12-09-16 Chicago IL 60661-2592 **Group Code** Departure : 12-22-16 **United States** Company Conf. No. : 62235735 Membership No. : PC 682512067 Rate Code: IYOTH Page No. : 1 of 3 Invoice No.

Date	Descrip	ition	Charges	Credits
12-09-16	*Accommodation		126.00	
12-09-16	State Tax		14.99	
12-09-16	City Tax		5.67	
12-09-16	County Tax		1.26	
12-10-16	*Accommodation		126.00	
12-10-16	State Tax	16	14.99	
12-10-16	City Tax		5.67	
12-10-16	County Tax		1.26	
12-11-16	*Accommodation		117.00	
12-11-16	State Tax		13.92	
12-11-16	City Tax		5.27	
12-11-16	County Tax		1.17	
12-12-16	*Accommodation		135.00	
12-12-16	State Tax		16.07	
12-12-16	City Tax		6.08	
12-12-16	County Tax		1.35	
12-13-16	*Accommodation		135.00	
12-13-16	State Tax		16.07	
12-13-16	City Tax		6.08	
12-13-16	County Tax		1.35	
12-14-16	*Accommodation		135.00	
12-14-16	State Tax		16.07	
12-14-16	City Tax		6.08	
12-14-16	County Tax		1.35	
12-15-16	*Accommodation		117.00	



12-29-16

Room No. : 1523 Folio No. : 603620 Cashier No. : 75 Joyce Barksdale : 12-09-16 Arrival 500 W Madison St Ste 2000 A/R Number Chicago IL 60661-2592 Departure : 12-22-16 **Group Code United States** Conf. No. : 62235735 Company Rate Code: IYOTH Membership No.: PC 682512067 Page No. : 2 of 3 Invoice No.

Date		Description	Charges	Credits
12-15-16	State Tax		13.92	
12-15-16	City Tax		5.27	
12-15-16	County Tax		1.17	
12-16-16	*Accommodation		117.00	
12-16-16	State Tax		13.92	
12-16-16	City Tax		5.27	
12-16-16	County Tax		1.17	
12-17-16	*Accommodation		117.00	
12-17-16	State Tax		13.92	
12-17-16	City Tax		5.27	
12-17-16	County Tax		1.17	
12-18-16	*Accommodation		117.00	
12-18-16	State Tax		13.92	
12-18-16	City Tax		5.27	
12-18-16	County Tax		1.17	
12-19-16	Visa	XXXXXXXXXXXX2233		1,458.14
12-19-16	*Accommodation		117.00	
12-19-16	State Tax		13.92	
12-19-16	City Tax		5.27	
12-19-16	County Tax		1.17	
12-20-16	*Accommodation		117.00	l
12-20-16	State Tax		13.92	
12-20-16	City Tax		5.27	,
12-20-16	County Tax		1.17	,
12-21-16	Visa	XXXXXXXXXXXX2233		274.72



12-29-16

Room No. : 1523 : 603620 Cashier No. : 75 Folio No. Joyce Barksdale : 12-09-16 Arrival 500 W Madison St Ste 2000 A/R Number Departure : 12-22-16 Chicago IL 60661-2592 Group Code **United States** Conf. No. : 62235735 Company Rate Code: IYOTH Membership No. : PC 682512067 Page No. : 3 of 3 Invoice No.

Date		Description		Charges	Credits
12-21-16	*Accommodation			117.00	
12-21-16	State Tax			13.92	
12-21-16	City Tax			5.27	
12-21-16	County Tax			1.17	
12-22-16	Visa	XXXXXXXXXXXZ233			137.36
Thank you	Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.lhg.com/reviews.		Total	1,870.22	1,870.22
We look forward to welcoming you back soon.		Balance	0.00		